2023-2024

# STUDENT CATALOG

PACIFIC NORTHWEST UNIVERSITY OF HEALTH SCIENCES





# Letter From The President

Welcome to Pacific Northwest University of Health Sciences (PNWU)!

PNWU is a nonprofit university founded in 2005 by a visionary and dedicated group of physicians and community leaders. With generous support from the founders, trustees, donors, community agencies, and health systems, PNWU is fulfilling its mission of educating students to become physicians and other health care professionals for rural and medically underserved communities throughout the Pacific Northwest.

This catalog is a guide for you, faculty, and staff to understand PNWU policies and procedures and is intended to support high ideals in learning and conduct to assure that our graduates exceed professional standards and expectations for health care providers.

I wish you continuous learning and great success at PNWU!

Sincerely, Michael J. Lawler, PhD President

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# ABOUT THE UNIVERSITY

# **Mission Statement**

Pacific Northwest University of Health Sciences educates and trains health care professionals emphasizing service among rural and medically underserved communities throughout the Northwest. (Approved by the Board of Trustees on November 20, 2013.)

#### Vision

Revolutionizing Community Health.

#### Mission Fulfillment Goals

- Student matriculation reflects rural, Northwest, and medically underserved communities
- Student wellbeing structures and functions are optimized for student success
- Students are academically prepared for postgraduate endeavors

(Approved by President's Advisory Council on March 16, 2021)

#### Institutional Values

- Mission Driven Committed to create, sustain, and improve quality educational programs specifically for rural and medically underserved communities
- Collaborative Working together with thoughtful actions, efforts, and concerns to meet each opportunity, issue, or challenge presented
- Compassionate Every individual is respected and treated with consideration, kindness, and understanding
- Genuine Real people providing real solutions which have direct impact on community health, resources, and outcomes
- Student Focused Unwavering support for every student empowers all to realize their full potential
- Healthy At PNWU, you'll learn what it means to be part of a healthy community, and how you thrive by being part of it

# Diversity, Equity and Inclusion

PNWU intentionally commits to educating, encouraging, empowering, and advocating for a diverse, equitable, and inclusive community. We will endeavor to implement polices, remove barriers, share resources, and practice restorative justice that enhances recruitment, retention, and success for students, faculty, staff, and the community. For more information visit the <u>Office of Diversity</u>, <u>Equity</u>, and <u>Inclusion</u> page at PNWU.edu.

# History of Pacific Northwest University of Health Sciences

In response to the growing health care needs of the Pacific Northwest, community leaders in Yakima, Washington, formulated a plan to establish a health sciences university with an initial focus on an osteopathic medical school. Pacific Northwest University of Health Sciences (PNWU) was founded as a 501(c)(3) corporation on February 16, 2005. In the following two years, those community members, several of whom became the original Board of Trustees, raised over \$20 million in cash and in-kind contributions, primarily from the Yakima community. A portion of the 70-acre plot of land, which is the present site of the medical school, was one of the in-kind contributions. The capital raised established

the financial reserves required by the American Osteopathic Association, Commission on Osteopathic College Accreditation (AOA COCA) to apply for accreditation for an osteopathic medical school.

In March 2007, the Washington Higher Education Coordinating Board (HECB), now the Washington Student Achievement Council (WSAC) authorized PNWU to offer the doctor of osteopathic medicine (DO) degree. Pacific Northwest University of Health Sciences College of Osteopathic Medicine (PNWU-COM) was granted applicant status from the AOA COCA on November 7, 2005, and pre-accreditation status in April 2007. PNWU-COM became the second of only two medical schools in Washington State and was the first new medical school in the Pacific Northwest in over 60 years.

The AOA COCA awarded Initial Provisional Accreditation status to PNWU-COM at their August 25-26, 2007 meeting. This action established the initial class size of 70 students. That inaugural class matriculated in August 2008.

Groundbreaking for Butler-Haney Hall, the first building on the PNWU campus, was held May 16, 2007, and the dedication ceremony to celebrate the completion of Butler-Haney Hall was held July 23, 2008. Less than two years later, construction of the Cadwell Student Center began. It was completed in February 2011. In the spring of 2012, the PNWU Board of Trustees awarded the contractor bid to undertake the expansion of Butler-Haney Hall which was completed just over a year later. The expansion delivered a 7,600 square- foot auditorium which can be divided into two auditoria with occupancy of 200 individuals per side, additional offices, a larger library and simulation laboratory, and a café area for students. The campus continues to grow as evidenced by the University Conference Center which was completed in 2015, the addition of Watson Hall completed in 2019, and the Student Learning Center building that is currently under construction.

PNWU received the Institutional Review Board/Independent Ethics Committee Registration from the US Department of Health and Human Services on April 27, 2009, which officially established the PNWU Institutional Review Board (IRB). This was a crucial first step in establishing the path to research at PNWU.

The COM was accredited by the AOA COCA in April 2012, and the inaugural class graduated a month later. With accreditation of the COM achieved, PNWU sought to expand the class size from 70 to 135 as part of the University's plan to further address the physician shortage. The class size increase was granted and the first class of 135 students matriculated in the fall of 2013.

Following accreditation of the COM, the University embarked on regional accreditation through the Northwest Commission on Colleges and Universities (NWCCU) and was accredited by the Commission at the January 2018 meeting. Accreditation by NWCCU indicates that PNWU meets or exceeds criteria for the assessment of institutional quality evaluated through a peer review process and allows PNWU to pursue additional health care education programs.

The University is always looking to expand its services. In November of 2014, PNWU was approved by the AOA to sponsor continuing medical education (CME). One year later, PNWU was recognized as a CME sponsor by the Washington State Medical Association. This allows PNWU to provide both DO and MD continuing education. Additionally, partner programs with Washington State University and Heritage University advance collaborative health care research and engagement opportunities throughout the Northwest.

In April 2020, the Board of Trustees authorized PNWU to pursue a Master of Arts in Medical Sciences (MAMS) degree program. PNWU received approval to add the MAMS program by the Washington Student Achievement Council (WASC) in October 2020 and by the Northwest Commission on Colleges and Universities (NWCCU) in December 2020 making MAMS the second degree program offered by PNWU. The first class of MAMS students took their seats in August of 2021.

In June 2018, the Board of Trustees approved PNWU to pursue a doctor of physical therapy (DPT) program. PNWU received approval to add the DPT program by the WSAC and NWCCU in May 2021 making DPT the third degree program offered by PNWU. The DPT program received Candidate for Accreditation status from the Commission on Accreditation in Physical Therapy Education in November 2021 and matriculated its first class in fall 2022.

PNWU received approval to add the MSOT program by the WSAC and NWCCU in May 2021 making it the fourth degree program offered by PNWU. The MSOT program received Candidate for Accreditation status from the Accreditation Council for Occupational Therapy Education in August 2022 and will matriculate the first class in fall 2023.

# Accreditation

#### **Pacific Northwest University of Health Sciences**

PNWU is accredited by the Northwest Commission on Colleges and Universities (NWCCU).

Contact information for NWCCU: Northwest Commission on Colleges and Universities 8060 165th Avenue N.E., Suite 200 Redmond, WA 98052 General phone: 425.558.4224 http://www.nwccu.org/

#### **College of Osteopathic Medicine**

PNWU-COM has been granted accreditation by the Commission on Osteopathic College Accreditation (COCA) of the American Osteopathic Association.

Contact information for the AOA COCA: American Osteopathic Association Commission on Osteopathic College Accreditation 142 E. Ontario St. Chicago, IL 60611-2864 Toll-free phone: 800.621.1773 General phone: 312.202.8000 Fax: 312.202.8200 Email: predoc@osteopathic.org https://osteopathic.org/accreditation/

#### **Physical Therapy Program**

The School of Physical Therapy (SOPT) at Pacific Northwest University of Health Sciences (PNWU) is seeking accreditation of a new doctor of physical therapy program from the Commission on Accreditation

in Physical Therapy Education (CAPTE). Candidate for Accreditation status was granted by CAPTE November 2, 2021.Candidate for Accreditation is an accreditation status affiliation with the Commission on Accreditation in Physical Therapy Education that indicates the program may matriculate students in technical/professional courses. Achievement of Candidate for Accreditation status does not assure the program will be granted Initial Accreditation.

Contact information for CAPTE:

Commission on Accreditation in Physical Therapy Education (CAPTE) American Physical Therapy Association 3030 Potomac Ave, Ste 100 Alexandria, VA, 22305-3085 Toll-free phone: 800.999.2782 General phone: 703.706.3245 Email: accreditation@apta.org www.capteonline.org

#### **Occupational Therapy Program**

The School of Occupational Therapy (SOT) at Pacific Northwest University of Health Sciences (PNWU) is seeking accreditation of a new Master of Science in occupational therapy program from the Accreditation Council for Occupational Therapy Education (ACOTE). Effective August 18th, 2022, the Master of Science in Occupational Therapy (MSOT) program at Pacific Northwest University of Health Sciences has been granted Candidate for Accreditation status.

Contact information for ACOTE:

Accreditation Council for Occupational Therapy Education (ACOTE) American Occupational Therapy Association 6116 Executive Boulevard, Suite 200 North Bethesda, MD, 20852-4929 Phone: 301.652.AOTA Email: accred@aota.org www.acoteonline.org

# State Authorization

Pacific Northwest University of Health Sciences is authorized by the Washington Student Achievement Council and meets the requirements and minimum educational standards established for degree-granting institutions under the Degree-Granting Institutions Act. This authorization is subject to periodic review and authorizes Pacific Northwest University of Health Sciences to offer specific degree programs. The Council may be contacted for a list of currently authorized programs. Authorization by the Council does not carry with it an endorsement by the Council of the institution or its programs. Any person desiring information about the requirements of the act or the applicability of those requirements to the institution may contact the Council at P.O. Box 43430, Olympia, WA 98504-3430 or by email at degreeauthorization@Wsac.Wa.gov.

The transferability of credits earned at Pacific Northwest University of Health Sciences is at the discretion

of the receiving college, university, or other educational institution. Students considering transferring to any institution should not assume that credits earned in any program of study at Pacific Northwest University of Health Sciences will be accepted by the receiving institution. Similarly, the ability of a degree, certificate, diploma, or other academic credential earned at Pacific Northwest University of Health Sciences to satisfy an admission requirement of another institution is at the discretion of the receiving institution. Accreditation does not guarantee credentials or credits earned at Pacific Northwest University of Health Sciences will be accepted by or transferred to another institution. To minimize the risk of having to repeat coursework, students should contact the receiving institution in advance for evaluation and determination of transferability of credits and/or acceptability of degrees, diplomas, or certificates earned.

The Washington Student Achievement Council (WSAC) has authority to investigate student complaints against specific schools. WSAC may not be able to investigate every student complaint. Visit https:// www.wsac.wa.gov/student-complaints for information regarding the WSAC complaint process.

# Nondiscrimination

PNWU is an equal opportunity employer and makes employment and student application decisions on the basis of merit. The University shall not discriminate against faculty, staff, volunteers, students, or applicants on the basis of race, ethnicity, color, religion, sex, gender, national origin, age, disability, sexual orientation, gender identity, marital status, or any other characteristic protected by law for any reason including recruitment, selection, and promotion.

PNWU includes a statement of nondiscrimination in all its brochures and catalogs dealing with student admission, programs, and scholarship, and refers to its nondiscrimination policy in other written advertising used as a means of transmitting information about its programs to prospective students.

# Code of Conduct

PNWU is committed to the highest standards of professionalism and integrity in all aspects of University and University-sponsored activities; and attaining such standards requires concerted effort by all members of the University community. Federal, state, and local regulations which govern our activities are increasingly complex. It is important that all understand relevant policies and know what is required in terms of compliance and reporting.

Please read the <u>Code of Conduct Policy</u> carefully and take all steps necessary to apply the principles. If you have any questions, please contact the Office of Compliance, Ethics, and Integrity Services at compliance-ethics@pnwu.edu.

# Conflict of Interest and Disclosure

The Board of Trustees, employees, and volunteers shall disclose any conflict of interest. Any party who does not comply with the Conflict of Interest Policy may face corrective action.

# **Resources - Finding Information**

This catalog serves as a resource for information, services, and links to policies on <u>PNWU.edu</u>. There are several other places to obtain pertinent information and updates.

- forms, directory, and links to other important information.
- PNWU.

- course svllabi.
- E\*Value: Osteopathic clinical rotation schedules and evaluations.
- goals, and monitors course activity grades.
- Panopto: Review lecture recordings according to your own pace.
- MedU: Access virtual patient cases.
- sexual assault prevention.

# Disclaimer

The Student Catalog is the University's official compilation for all curriculum and serves as the basis for program requirements for the academic year. The catalog represents information and requirements that may be altered from time to time by the University at its sole discretion. The provisions of the Student Catalog do not constitute a contract. The University reserves the right to change any provision or requirement at any time. The University complies with the Drug-Free Workplace Act of 1988 and the Drug-Free Schools and Communities Act Amendments of 1989.

The Catalog is the responsibility of Enrollment Services. Any recommendations for additions, deletions, or changes in the Catalog must be submitted in writing. Final approval must be granted by the president of the University.

Most of the forms, policies and procedures referred to throughout this catalog are available on the University website, <u>PNWU.edu</u>. All inquiries regarding the Student Catalog should be directed to Enrollment Services at registrar@pnwu.edu or 509.249.7818.

# **Contact Information**

Administrative offices are open weekdays from 8:00 a.m. to 5:00 p.m. Visitors are strongly encouraged

• PNWU.edu: The website is a resource for all student needs, latest news, University calendar,

Student Handbook: A compilation of procedures and guidelines that provide the framework of expectations for academic performance, conduct, behavior, and professionalism as a student at

Self-Service: PowerCAMPUS, Self-Service, is the student portal for class schedule, University account balance and statements, student ID, financial aid, grades, and transcripts.

• Financial Aid Portal: PowerFaids financial aid portal allows students to accept, adjust, or decline their financial aid eligibility and see details that determine their financial aid eligibility.

· Moodle: A learning management system used for coursework information, assignments, and

Certiphi MyRecordTracker for student onboarding/clinical credentialing documents.

Exxat: A web-based clinical management software used for physical therapy and occupational therapy clinical experiences and related schedules, evaluations, and credentialing documents.

• ProgressIQ: Academic advising tool to track a students' progress in meeting their academic

• Vector: annual training system for blood borne pathogen, HIPAA, hazard communication, and

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to make appointments before visiting the campus to ensure that the person they need to see is available. The PNWU official mailing address is:

Pacific Northwest University of Health Sciences Mailing address: 111 University Parkway, Ste. 202, Yakima, WA 98901 Physical address: 200 University Parkway, Yakima, WA 98901-1448

509.452.5100 - Main office 866.329.0521 - Toll Free 509.452.5101 - Fax

Website: <u>PNWU.edu</u> Email: <u>info@pnwu.edu</u>



# GENERAL POLICIES AND SERVICES

# Academic Freedom

The University will foster and maintain full freedom of discussion, inquiry, teaching and research, and standards of professional conduct and public morals. The faculty, the staff, the administration, and the students of the University are entitled to discuss relevant subjects freely in the classroom. In scholarship and publication, each faculty, staff, administrator, and student is entitled to investigate, pursue inquiry, and discuss freely those subjects which they are competent to address; and to develop, maintain, and present opinion and reasoned conclusions relevant to the work.

# Scholarly Activity

The <u>Office of Scholarly Activity</u> (OSA) serves PNWU programs and engages community partners in scholarly endeavors. OSA provides resources for research coordination including research design, IRB administration, grant submissions, fund management, and dissemination of scholarly outcomes.

Scholarly activities fall into the following categories: research (bench, translational, and/or human subjects), organized clinical discussions, rounds, journal clubs, conferences, peer-reviewed funding, publication of original research or review articles in peer reviewed journals, chapters in textbooks, publication or presentation of case reports or case series, clinical series at local, regional, or national professional and scientific society meetings, and/or participation in national committees or educational organizations. All PNWU faculty, staff, and students are strongly encouraged to notify OSA when involved or engaged in any level of scholarly activity/research.

# Accommodations for Disability

Students may find that they have disabilities that affect their ability to equitably access educational opportunities. PNWU reasonably accommodates students with disabilities, who are otherwise qualified for admission and can meet the minimal technical standards as stated in this catalog, with or without accommodations. Individual programs may have more specific regarding technical standards in their student handbook. Students should expect to provide documentation establishing a relationship between the disability and the need for accommodation. Accommodation must not alter the curriculum. All reasonable accommodations are determined on a case-by-case basis by conducting an individualized evaluation.

All disability-related information including documentation, accommodation letters, correspondence, and consultations are considered private and will be managed in accordance with <u>The Family Educational</u> <u>Rights and Privacy Act</u> (FERPA) regulations. Please read this carefully, as there are instances that may necessitate the release of student documentation without consent. This includes electronic, paper, verbal, and any other types of communication. In addition to fulfilling legal obligations, maintaining a high standard of privacy also serves to maintain an environment in which students with disabilities feel respected, safe, supported, and protected.

Breaches of confidentiality are taken very seriously by PNWU. Unauthorized disclosures of student information must be documented and can result in the institution being in non-compliance with federal regulations. Additionally, such disclosures may violate state privacy laws and may subject the university and the individual to liability. Please contact the Office of Disability Services if there are any questions, issues, or concerns regarding maintaining the confidentiality of information.

# **Technical Standards**

Pacific Northwest University of Health Sciences seeks to produce highly skilled and compassionate health care professionals. Students are expected to develop a robust knowledge base and the requisite skills, with the ability to appropriately apply their knowledge and skills, effectively interpret information, and contribute to individual centered decisions across a broad spectrum of situations and settings. The following technical standards, in conjunction with the academic standards, are requirements for admission, promotion, and graduation. Candidates are strongly encouraged to check the relevant program's handbook for any additional technical standards. The term "candidate" refers to candidates for admission to health profession schools as well as current health profession students who are candidates for retention, promotion, or graduation. These requirements may be achieved with or without reasonable accommodations. Candidates with disabilities are encouraged to contact the Office of Disability Services early in the application process to begin a confidential conversation about what accommodations they may need to meet these standards. Fulfillment of the technical standards for graduation from health profession programs does not guarantee that a graduate will be able to fulfill the technical requirements of any specific job position.

#### **Observational skills**

Candidates must acquire information as presented through demonstrations and experiences in the foundational sciences. In addition, candidates must be able to evaluate individuals accurately and assess their relevant health, behavioral, and medical information. Candidates must be able to obtain and interpret information through a comprehensive assessment of individuals, correctly interpret diagnostic representations of individuals' physiologic data, and accurately evaluate individuals' conditions and responses.

#### **Communication skills**

Candidates must exhibit interpersonal skills to enable effective caregiving of individuals, including the ability to communicate effectively, with all members of a multidisciplinary healthcare team, care recipients, community members and organizations, and other supporting individuals, in person and in writing. Candidates must be able to clearly and accurately record information and accurately interpret verbal and nonverbal communication.

#### **Clinical skills**

Candidates must be able to perform routine physical examination and diagnostic maneuvers. Candidates must be able to provide or direct general care and emergency treatment for individuals and respond to emergency situations in a timely manner. Candidates must meet applicable safety standards for the environment and follow universal precaution procedures.

#### Intellectual-conceptual, integrative, and cognitive skills

Candidates must effectively interpret, assimilate, and understand the complex information required to function within the curriculum, including, but not limited to, the ability to comprehend three-dimensional relationships and understand the spatial relationships of structures; effectively participate in individual, small-group, and lecture learning modalities in the classroom, clinical, and community settings; learn, participate, collaborate, and contribute as a part of a team; synthesize information both in person and via remote technology; interpret causal connections and make accurate, fact-based conclusions based on available data and information; formulate a hypothesis and investigate potential answers and outcomes; and reach appropriate and accurate conclusions.

#### Behavioral attributes, social skills, and professional expectations

Candidates must exercise good judgment; promptly complete all responsibilities attendant to the diagnosis and care of individuals; and develop mature, sensitive, and effective relationships with individuals. The skills required to do so include the ability to effectively handle and manage heavy workloads, function effectively under stress, adapt to changing environments, display flexibility, and learn to function in the face of the uncertainties inherent in the health problems of individuals. Candidates are expected to exhibit professionalism, personal accountability, compassion, integrity, concern for others, and interpersonal skills including the ability to accept and apply feedback and to respect boundaries and care for all individuals in a respectful and effective manner regardless of gender identity, age, race, sexual orientation, religion, disability, or any other protected status. Candidates should understand and function within the legal and ethical aspects of practice and maintain and display ethical and moral behaviors commensurate with the role of a health care professional in all interactions with care recipients, faculty, staff, students, and the public. Interest and motivation throughout the educational processes are expected of all candidates.

# Attendance

Failure to attend designated mandatory activities as published in the course syllabi will result in consequences as described in the syllabi. Students are responsible for the content they have missed. Only a student with an excused absence will be eligible to make up any assessments.

Pacific Northwest University of Health Sciences reasonably accommodates student absences to allow students to take holidays for reasons of faith or conscience or for organized activities conducted under the auspices of a religious denomination, church, or religious organization.

# Children in Learning Environment

Children of students are allowed in the learning environment for infrequent, brief visits (generally not longer than two hours) or to participate in University programs and events within the specified parameters detailed in the policy.

# Academic Skill Development

Academic skill development is available for any student who would like help improving study strategies or test-taking skills. Assistance is available in several areas including, becoming active learners, notetaking, effectively using resource materials, studying for tests, reducing test anxiety, effective use of tutoring services, and studying in small groups. The Learning Skills Specialist will oversee delivery of many of these services, which may be provided by staff, faculty, or students. Throughout the year, a variety of seminars/workshops may be offered to students.

# Tutoring and Recitation

PNWU provides tutorial services for students who desire additional educational assistance. Priority for these services is given to students who have been identified as requiring such educational assistance. PNWU encourages students to establish informal study groups and/or find study partners. The Learning Skills Specialist coordinates a formal tutoring and recitation program. With assistance and

recommendations from the faculty, peer tutors, and recitation leaders are identified and made available to students who need help. The tutoring program provides the student with the opportunity to be assigned a near-peer or peer tutor at no cost for one hour/week/subject. Students may apply for tutoring services by submitting a <u>Tutoring Services Request</u>. Students may contact the Learning Skills Specialist with any questions regarding tutoring services.

### Academic Advisement

Each student is provided a faculty advisor to support student development and success. The faculty advisors will be a faculty member whose responsibilities are to monitor the progress of student advisees, to help advisees locate academic resources, and to be available for any personal or academic support needed by the advisees. The student is strongly encouraged to participate in all advisory activities and is responsible for scheduling individual meetings with their faculty advisors on an agreed upon timeline and as required.

### **Career Advising**

Student Affairs leads a multi-department effort to provide guidance and information for student career choices. Links to a number of resources may be found on the <u>Career Planning</u> webpage.

# Counseling Services

PNWU provides mental health services via two primary options. First is the <u>Student Assistance Program</u> (SAP). The SAP provides the student and any members of the student's household with an opportunity to confidentially discuss problems and concerns that may be affecting their lives. Within this confidential program, students are given appropriate resources designed to help with specific problems. The SAP provides behavioral health services as well as referrals for local resources such as child care providers or utility payment assistance programs, and brief financial and legal consultations. This care is available for all students both on campus and away at clinical courses. SAP services are available at no cost to the student or members of the student's household.

Second, PNWU contracts with local therapists to provide behavioral health services. These licensed psychologists, social workers, and mental health counselors are available for short-term care, and are available only to PNWU students, not to members of students' households.

The student may be subject to psychiatric, psychological, substance use disorder, or medical assessment and/or evaluation and/or treatment to ensure fitness for duty at the University's discretion. Any student need for psychiatric, psychological, or medical assessment and/or treatment whether voluntary or due to a recommendation or requirement by the Student Progress Committee, or any other PNWU official will be at the sole expense of the student.

# Health Care Coverage and Health Care Providers

PNWU students must present proof of personal health insurance, as defined by the Affordable Care Act (ACA), to Enrollment Services at matriculation and again by August 1 of each year they are enrolled.

They must maintain personal health insurance throughout their educational program. The student is solely responsible for their medical bills. The University assumes no responsibility to seek reductions or waivers. PNWU secures disability insurance for students in doctoral level programs.

Though the University does not endorse any specific health insurance plan or health care provider, it does provide students a list of health care professionals and hospitals to assist students in finding diagnostic, preventative, and therapeutic health services. A <u>list of providers</u> is available as a resource at PNWU. edu. It is the desire of PNWU to assist and support students in receiving needed physical health care by establishing agreements with healthcare service providers within the Yakima community.

It is recommended that students obtain healthcare from non-PNWU affiliated faculty members. However, if this situation arises, the PNWU employee must recuse themselves from any discussions, or decisions involving the students' academic or professional progress.

# **Immunizations**

PNWU, in conjunction with requirements of regional hospitals and clinics and the Center for Disease Control (CDC) recommendations for Health Care Providers (Immunization of Health-Care Personnel: Recommendations of the Advisory Committee on Immunization Practices (ACIP) *Recommendations and Reports* **November 25, 2011 / 60(RR07);1-45**), adheres to the following requirements:

<u>Required immunizations</u> must be current as of start of classes of the student's first year and maintained thereafter. A blood test (titer) documenting immunity is required in some cases and to prove immunity when there is no vaccination record.

- Hepatitis B and quantitative titer
- Tetanus, Diphtheria, and Pertussis (Tdap) one lifetime dose
- Tetanus toxoid (Td or Tdap) in last 10 years
- Measles, Mumps, and Rubella (MMR) and quantitative titer
- Varicella or serum titer
- Influenza vaccination annually
- Tuberculosis surveillance annually
- COVID-19 vaccine

Recommended and encouraged immunizations if high risk of exposure.

- Hepatitis A
- Diphtheria, Pertussis, Tetanus (DPT)
- Meningococcal
- Polio (Type OPV/IPV)

Students may request a vaccination exception for medical or religious reasons. See the Student Handbook for details on the process. Students may be required by an external clinical facility to have additional immunizations or tuberculosis screening. Students must comply with these requests and pay for them at their own expense.

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# Employment

A health professions curriculum content and time required for completion is such that any outside employment by the student is strongly discouraged.

# Food Service/Dining Facilities

Pacific Northwest University of Health Sciences offers limited catering and vending options.

# Housing

Students must secure their own housing for the duration of their health professions education. PNWU may have suggestions to assist students in their search for appropriate, affordable housing. Students may find resources for housing in the Yakima Valley on the PNWU.edu website.

A PNWU employee who may have influence in academic assessment or promotion of students may not provide housing/accommodations to students.

# **Official Mailing Address**

It is imperative that Student Affairs have current records regarding name, mailing address, telephone number, physical address, and emergency contact information. Students must immediately update any changes in information using PowerCAMPUS Self-Service.

# **Official Photo**

An official ID photo of all students is taken upon matriculation. If a student wants to update their photo it must be done by the PNWU designated photographer. All retakes will be at the student's expense.

# Criminal or Civil Convictions and Criminal Background Check

Prior to matriculation and starting full-time clinical experiences with a contracted/affiliated hospital or healthcare facility, students are required to undergo a criminal background check, at their own expense, to enhance patient safety and protection. This is a requirement placed on healthcare facilities by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). An entity that is approved and licensed to perform background checks will be selected at the sole discretion of PNWU.

After a criminal background check has been completed, all admitted students must notify Enrollment Services and current students must notify Student Affairs within three days of any criminal or civil recordable event that occurs. The recordable event must be reviewed to determine the student's academic standing and eligibility for clinical experiences. Students are expected to fully cooperate with Enrollment Services or Student Affairs in documenting the recordable event.

The criminal background search may include, but is not limited to, sources such as the following:

Social security number trace

- Washington State Patrol criminal background check
- Criminal histories background check
- Nationwide wants & warrants
- Credit Reporting Act
- Sex offender background check
- Anti-Terrorism and USA Patriot Act
- Sanctions

PNWU will review any findings for severity, frequency/pattern, time period, rehabilitation, unprofessional behavior, accountability, and outcome. The applicant/student should investigate possible consequences for future licensure.

- with a copy to Enrollment Services.
- criminal background item may result in a rescinded offer of admission.
- at PNWU and may result in dismissal from PNWU.

# Drug and Alcohol

PNWU is committed to being a drug-free, healthy, and safe place of learning. The unlawful possession, use, distribution, or sale of illicit drugs, controlled substances, prescription drugs, alcohol, other intoxicating substances, and drug related paraphernalia by employees or students on PNWU property or as part of any of its activities is prohibited. No alcoholic beverages or illegal drugs may be manufactured in any academic facility, clinic, or hospital associated with PNWU.

Any student who has been convicted of an offense under any federal or state law involving the possession or sale of illegal drugs or the abuse/misuse of alcohol during their enrollment at PNWU is subject to immediate suspension and possible dismissal at the discretion of the academic program's Student Progress Committee.

PNWU makes available drug or alcohol counseling, treatment, or rehabilitation or re-entry programs. Students may seek these services through the Student Assistance Program. For more information, please see the <u>Counseling Services</u> section of the Student Catalog. Osteopathic medical students may also contact the Washington Physicians Health Program to participate in their confidential services: www.wphp.org.

· Health and Human Services/Office of Inspector General list of excluded individuals, General Service Administration list of parties excluded from Federal Programs Consumer report information related to character, general reputation and credit that may be subject to the Fair

A copy of the criminal background report will be delivered directly to the student upon request

• Any previously unreported item(s), questionable or adverse findings, or non-compliance for accepted students will be reviewed by the Director of Security and referred to the appropriate Admission Committee for further evaluation. A previously unreported, adverse, or questionable

Any previously unreported item(s), questionable or adverse findings, or non-compliance for current students will be reviewed by the Director of Security and referred to Student Affairs. The student may not be allowed to participate in any classroom or clinical education activities and will be referred to the appropriate Student Progress Committee to determine their ability to continue

# Drug Screen

The Joint Commission on Accreditation of Healthcare Organizations (JCAHO) requires all individuals involved in the delivery of health care to comply with applicable health screening requirements, including drug screening. In compliance with this requirement, PNWU requires that all students agree to undergo a drug screen whenever it is requested of them. The student will be charged for the cost of the drug screen.

- A copy of the drug screen will be delivered directly to the student upon request with a copy to Enrollment Services.
- Any questionable or adverse findings, non-compliance, or a diluted test for accepted students will be referred to the appropriate Admission Committee for further evaluation. An adverse or guestionable drug screen may result in a rescinded offer of admission.
- Any guestionable or adverse findings, non-compliance, or a diluted test for current students will be referred to Student Affairs. The student may not be allowed to participate in any classroom or clinical education activities and will be referred to the appropriate Student Progress Committee to determine their ability to continue at PNWU and may result in dismissal from PNWU.

# Tobacco - Smoke - Vape - Free

PNWU is a tobacco-, smoke-, vape-free environment. Smoking and other use of tobacco products are prohibited on University owned or leased property, and in University vehicles and any vehicle located on University property.

# **Dress** Code

Students will, during regular business hours (Monday - Friday, 8:00 a.m. - 5:00 p.m.), be dressed appropriately with awareness to personal hygiene, cleanliness, professional demeanor, and professional dress. Modest professional apparel, or scrubs (top and bottom), will be required for all activities in PNWU buildings. In the case of special events, students must adhere to professional dress.

# Sexual Harassment, Including Sexual Assault, Dating Violence, Domestic Violence, Stalking, and Retaliation

PNWU has a duty to provide a safe environment for students to learn, and employees to work, free from the detrimental effects of sexual and other harassment, bullying, intimidation, and any form of unlawful discrimination as prohibited by Federal and State laws. Any violation of PNWU policy or applicable law by a faculty member, fellow student, employee, or persons doing business with or for PNWU, will result in corrective or disciplinary action which could include dismissal from PNWU, termination from employment, or termination of any contractual relationship. Some violations could result in a report to law enforcement.

This policy applies to all PNWU programs and activities.

The relationship between a student and faculty/preceptor or patients must always be kept on a professional basis. Conduct in an unprofessional manner will be considered improper behavior and will be grounds for disciplinary action, including possible dismissal from PNWU.

#### **Reporting Violations and Filing a Complaint**

Any student who believes they have experienced sexual misconduct, sexual harassment by anyone, including a faculty member, fellow student, employee, or by persons doing business with or for PNWU should report such conduct to the Title IX Coordinator or their designee or using the Title IX Report form. If the individual is comfortable doing so, they should also tell the offender that such conduct is unwelcome and unacceptable.

Individuals who have witnessed policy violations are encouraged to make a prompt report.

All individuals considering reporting policy violations but wishing to discuss the process or related issues can seek advice from certain confidential resources who are not required to share private personally identifiable information - such as mental health providers, off campus crisis clinics, or clergy and other religious officials who are by law permitted to maintain confidentiality. Most campus resources have certain legal obligations including a duty to report, so they are not able to advise individuals on a confidential basis or maintain confidentiality. However, most resources can discuss the process.

#### For additional information or to file a complaint, contact:

Title IX Coordinator – Ro Kmetz 200 University Parkway, IHL 202 | Yakima, WA 98901 TitleIX@pnwu.edu | (509) 249.7916

Note that the Title IX Coordinator has broad responsibilities to the University and is not a confidential resource; individuals cannot make a report to the Title IX Coordinator in confidence.

# Student Rights, Responsibilities, and the Honor Code

The PNWU Student Government developed an honor code to educate and emphasize the importance of professionalism in the classroom, lab, clinic, and community. As part of orientation the student government association has each student sign and agree to uphold the PNWU Honor Code, as follows:

# Honor Code

Adherence to an honor code promotes the growth and development of health care professionals at Pacific Northwest University of Health Sciences. We therefore commit to the following:

#### **Pledge of Academic Standards**

- Students will neither give nor receive aid in examinations or independent class work.
- Students will not represent others' work as their own.
- Students will abide by academic standards as put forth by each class instructor.

#### Pledge of Professionalism

- peers, faculty, and the community at large.
- Students will treat others with respect.

• Students will appreciate and respect the diverse perspectives, experiences, and identities of

Students will conduct themselves as ambassadors to the community from PNWU.

#### Pledge of Community Obligation

• Students understand that the integrity of the honor code is predicated upon agreement of the entire student body to uphold the spirit and the letter of the honor code.

#### Charge to Uphold

- Students' first obligation is to directly approach peers concerning perceived transgressions.
- In the event a student cannot fulfill the above obligation, they may ask a member of the student body to act as their proxy.
- Students understand that failure to report indiscretions constitutes an infraction in kind.
- Students' final resource by which to report honor code violations is the Dean of Students.

### Professionalism

Professionalism is the basis of health care's contract with society. It demands placing the interests of patients above those of the health care professional, setting and maintaining standards of competence and integrity, and providing expert advice to society on matters of health. The principles and responsibilities of professionalism in health care must be clearly understood by both the profession and society.

Students at Pacific Northwest University of Health Sciences shall conduct themselves in a professional manner in accordance with the PNWU Student Honor Code and the oath, pledge, or code of ethics of their profession.

Each college, school, or academic program will develop procedures to address a lack of professionalism, and publish them in a student handbook. The procedures must define:

- How alleged violations of professional behavior are reported
- How severity, frequency, and patterns of behavior are addressed
- Timelines for responses to an allegation
- Communication to students involved
- An appeal process

# The Family Educational Rights and Privacy Act (FERPA)

The Family Educational Rights and Privacy Act (FERPA) of 1974 is a federal law governing access to student education records. FERPA stipulates conditions for release of information from education records and affords students the opportunity to review and seek revision of those records. Pacific Northwest University of Health Sciences (PNWU) accords all the rights provided by the law and reserves for itself the right to use and release student education records under the conditions specified by the law.

Education records, as defined by FERPA, include admission, academic, financial aid, placement records, and other information directly related to students with the exception of:

- Police records created by PNWU for the purpose of law enforcement;
- Student health records that are created and used solely in connection with the provision of health care:
- Employment records that relate exclusively to individuals in their capacities as employees; and
- Alumni or other post-attendance records.

FERPA regulations apply only to records held for institutional use concerning students who enroll at the University; they do not govern records of applicants who are denied admission or who choose not to attend the University, nor do they govern records kept by a University official that are the sole possession of the maker and are not normally revealed to anyone else except a temporary substitute (e.g., temporary reminder notes). FERPA stipulates that institutions may not disclose personally identifiable information contained in education records without a student's written consent, except under conditions specified by FERPA. Information is considered personally identifiable if it contains a student's name or the names of family members, a student's local or family address, an identification number, or descriptions or data sufficient to identify an individual.

FERPA permits access to student education records for school officials with legitimate educational interests. Student employees, students serving on official committees, and students serving in other positions in which they assist a University employee in performing her or his official tasks are considered school officials. No student employee shall have access to student education records within the college of their program.

With certain exceptions allowed by the law and listed below, no persons outside the University shall have access to, nor will the institution disclose any information from, a student's education record without the written consent of the student. FERPA permits information to be released from education records without written consent of the student to the following officials and agencies:

- Officials of other institutions to which students are applying to enroll
- Persons or organizations providing financial aid
- Individuals and organizations charged with oversight of the University, or of federal or state programs in which the University participates
- Accrediting agencies
- substances
- authorities not to disclose the existence of an order or subpoena)
- Persons in an emergency to protect the health or safety of students or other persons
- The Immigration and Naturalization Service under the terms and provisions of immigration law

With the exception of the above listed alcohol and drug violations, PNWU does not release information from student education records to parents without the written consent of students.

FERPA permits the University to release information concerning violent crimes and non-forcible sex offenses (statutory rape or incest) committed by its students. Victims of an alleged violent crime or nonforcible sex offense may be informed of the final results of University disciplinary hearings concerning the allegation. When a student is an alleged perpetrator of a violent crime or a non-forcible sex offense and the University concludes with respect to that allegation that the student has violated University rules, the University may release to the public the name of the student, the offense committed, and the sanction the University imposes against the student.

FERPA further allows student education records to be released to individuals or organizations performing research on behalf of, or in cooperation with, the University. When education records are released for

• Parents of any student under the age of 21, regardless of the student's dependency status, in cases where the student has violated laws or University rules governing alcohol or controlled

Persons as directed by a judicial order or lawfully issued subpoena, provided the University makes a reasonable attempt to notify the student in advance of compliance (unless directed by judicial

research purposes, FERPA requires the University and its research partners to implement procedures to safeguard their confidentiality. In addition, records released for research must be returned or destroyed when the research is completed, and research findings may not be presented in a manner that makes it possible to identify confidential data from an individual's education record. PNWU will release information from student education records to outside researchers only under the conditions specified by FERPA and only to those that agree in writing to safeguard the confidential information contained therein.

At its discretion, PNWU may publish or release *directory information* in accordance with the provisions of FERPA. Directory information includes student name, telephone number, e-mail address, a photograph, month and day of birth, dates of attendance, enrollment status, class, major fields of study, previous institutions attended, awards and honors (including honor roll), degrees conferred (including dates), participation in officially recognized activities, and/or residency/fellowship placement. Students may withhold directory information by giving written notification to Enrollment Services within two weeks after the beginning of the term. Requests for non-disclosure of directory information will be honored until graduation unless students submit a written request to have the block on their directory information removed. Students who wish to withhold directory information after they graduate, which would include their dates of attendance and degrees conferred, must submit another written request to Enrollment Services.

FERPA provides students with the right to inspect and review information contained in their education records, to challenge the content and accuracy of those records, to have a hearing if the outcome of the challenge is unsatisfactory, and to submit explanatory statements for inclusion in their files if they disagree with the decisions of the hearing panel. Enrollment Services has been designated by PNWU to establish procedures by which students may review their education records.

Students wishing to review their education records should submit a written request, clearly specifying the records of interest, to the official responsible for maintaining those records. Enrollment Services will assist in identifying the appropriate official. The responsible official will then arrange for the student to inspect the records within 45 days of the request and will notify the student of the time and place of inspection. Students may have copies made of their records with certain exceptions (e.g., students may not have a copy of academic records for which a financial "hold" exists, or a transcript of an original or source document produced by another institution or by a person not employed by PNWU). Copies will be made at the student's expense at prevailing rates.

Only records covered by FERPA, as delineated in the paragraph defining education records, will be made available for inspection. (However, students may have their health records reviewed by their own physicians.) Furthermore, the University is permitted or required to withhold from students the following sorts of records: financial information submitted by their parents, confidential letters of recommendation to which students have waived their rights of inspection, and education records containing information about more than one student. In the last case, the institution will permit access only to the parts of education records that pertain to the inquiring student.

Students who believe their education records contain information that is inaccurate, misleading, or held in violation of privacy rights or other rights, may ask the University to amend a record. In such cases, the student should write to the University official responsible for the record, identify the parts of the record the student believes should be changed, and indicate the reasons it should be changed. If University officials agree with the student's request, the appropriate records will be amended. If the University

decides not to amend the record as requested by the student, the student will be notified and advised of her or his right to a hearing regarding the request for amendment. Additional information regarding the hearing procedures will be provided to the student when notified of the right to a hearing. FERPA confers to the student the right to challenge grades only in cases where the grade has been incorrectly recorded. However, PNWU has other procedures for appealing grades.

Student requests for a formal hearing must be made in writing to Student Affairs, who, within ten (10) business days after receiving such a request, will inform the student of the date, place, and the time of the hearing. Students may present evidence relevant to the issues raised and may be assisted or represented at the hearings by one or more persons of their choice, including attorneys, at their own expense. The hearing panels that adjudicate such challenges are appointed by Student Affairs. The decisions of the hearing panel will be based solely on the evidence presented at the hearing and are final. They will consist of written statements summarizing the evidence and the reasons for the decision and will be delivered to all parties concerned. If the decision is in favor of the student, the education records will be corrected or amended in accordance with the decision of the hearing panel. If the decision remains not to amend the student's education record, the student has a right to insert a statement in her or his record commenting on the information therein. This statement will be maintained as a permanent part of the student's record and must be included when the record is disclosed to an authorized party.

Students who believe the adjudications of their challenges were unfair, or not in keeping with the provisions of FERPA, may request the assistance of the President of Pacific Northwest University of Health Sciences. Students who believe their FERPA rights have been violated may also file complaints with The Family Policy Compliance Office, US Department of Education, 400 Maryland Avenue S.W., Washington, DC 20202-4605.

### Credit for Experience

PNWU does not grant advanced standing or credit based upon experience.

### Credit by Examination

Students presenting extraordinary admission credentials may be granted credit in the appropriate course(s) if all of the following criteria are satisfied:

- Credit must have been earned at an accredited college or university

Credit earned by examination appears on the transcript with a pass (P) grade only. A percentage grade will not be issued, and the credits will not be included for class ranking or honors purposes.

# Student Transfers and Waivers

PNWU does not accept transfer students, transfer credits, or waive the requirements set forth in the student admission policy or process.

• Upon approval, a special examination will be administered under the auspices of the applicable department and a minimum score of 80 percent must be earned on the examination

The transferability of credits earned at Pacific Northwest University of Health Sciences is at the discretion of the receiving college, university, or other educational institution. Students considering transferring to another institution should not assume that credits earned in any program of study at Pacific Northwest University of Health Sciences will be accepted by the receiving institution. Similarly, the ability of a degree, certificate, or diploma, or other academic credential earned at Pacific Northwest University of Health Sciences to satisfy an admission requirement of another institution is at the discretion of the receiving institution. Accreditation does not guarantee credentials or credits earned at Pacific Northwest University of Health Sciences will be accepted by or transferred to another institution. To minimize the risk of having to repeat coursework, students should contact the receiving institution in advance for evaluation and determination of transferability of credits and/or acceptability of degrees, diplomas, or certificates earned.

# **Grade Posting**

PNWU adheres to the grade posting practices recommended under FERPA. Grades are not posted in a public manner either by student name, social security number, or student identification number. Faculty members, or their designee, will post grades in the PowerCAMPUS Self-Service system. FERPA permits the posting of grades in a public manner only if the student is assigned a unique identifier known only to the student and the faculty member.

# **Graduation Honors**

Graduates from academic programs that use a grading system that produces a grade point average are eligible for Latin honors designation on diplomas and transcripts.

- Cum laude: 3.5 to 3.69 cumulative grade point average
- Magna cum laude: 3.7 to 3.89 cumulative grade point average •
- Summa cum laude: 3.9 and above cumulative grade point average

# Transcripts, Diplomas, and Records

Permanent education records maintained by PNWU are the responsibility of Enrollment Services. Transcripts of academic records will only contain information regarding academic status. In cases where disciplinary action leads to the student's ineligibility for re-enrollment (dismissal), disciplinary action will become a part of the permanent academic record. Disciplinary records or information from such records will be made available to persons outside of PNWU only on the formal written request of the student involved or as otherwise allowed by law or regulation.

An official academic transcript will be transmitted directly to a legitimate educational institution, hospital, or governmental or non-governmental agency upon secure, online, request of the student (graduate) involved.

Unofficial academic transcripts are available to the student (graduate) from PowerCAMPUS Self-Service.

Students who have not fulfilled their financial and other obligations to PNWU shall not have transcripts or recommendations made available until such obligations are met, unless required by bankruptcy law.

One unofficial transcript will be provided to the student if an education record student review request is submitted.

If the University has knowledge that a student or graduate is in default on a federal, state, outside agency, or institutional loan or service obligation, the University will withhold all official transcripts, , and letters of recommendation for internships, residencies, employment, staff privileges, specialty certification, and licensing.

Diplomas will be mailed to students after the graduation ceremony and upon completion of all graduation requirements as defined in the student catalog. A request for duplicate diplomas may be made to Enrollment Services.

Students who have not received a diploma due to failure to satisfactorily fulfill their obligations to the University prior to the date of graduation and who have failed to do so following graduation shall not have the privilege of receiving transcripts, other records, or recommendations sent to any institution or entity until such obligations are cleared.

Questions or concerns regarding records and grades should be brought to Enrollment Services.

# **Record Retention**

The University complies with federal, state, and local laws, and accreditation body guidelines regarding record retention and disposition. All vital records are maintained securely for the appropriate amount of time. The record retention procedures for the University include, but are not limited to:

- Rights and Privacy Act as a permanent student record.
- record.
- record becomes a part of the permanent student record and transcript.
- award year in which the student last attended.

### Leave of Absence

A leave of absence (LOA) is a period of time approved by PNWU during which the student is not in attendance but is considered enrolled. Leave of absence is a temporary interruption in a student's education, generally reserved for medical conditions and emergency situations.

All requests for a LOA must be submitted by the student in writing, be signed, be dated and include the reason for the student's request. Students must also submit documentation from a qualified health care provider attesting to the need for the LOA and recommending a duration for the LOA. The request must be submitted 30 days in advance, unless unforeseen circumstances prevent the student from doing so. There must be a reasonable expectation that the student will return from the LOA for the request to be

• Academic records will be maintained by the University and governed by the Family Education

Non-academic records of disciplinary actions will be maintained by the University as the responsibility of Student Affairs. These actions are maintained as part of the student's permanent

In cases where disciplinary action leads to a student's dismissal/ineligibility for re-enrollment, the

• Financial aid records will be maintained by the University for three years after the end of the

approved. Total leave of absence time, must not exceed a total of 180 days in any 12-month period.

Prior to being granted the LOA, the student must receive student loan counseling regarding the effects taking the LOA or failure to return from a LOA may have on the student's financial aid and repayment. A student no longer attending classes and not approved for a LOA will be considered withdrawn as of the last date the student attended classes or engaged in other academic activities.

A student returning from a LOA must resume training at the same point in the academic program that they began the LOA and complete the coursework started prior to the LOA. The returning student must meet the technical standards required by the university and the appropriate program. The University will assess no additional institutional charges nor disburse any additional or subsequent financial aid proceeds until the student completes the coursework started prior to the leave of absence.

A student failing to return from an approved LOA is considered to have withdrawn as of the last date the student attended classes or engaged in other academic activities. The reclassification of the LOA to withdrawn requires the Federal Return of Title IV funds calculation (see the Federal Aid Refund Calculations section), which may result in the student owing PNWU tuition, other charges, and/or living costs no longer covered by previously disbursed financial aid. The grace period for Title IV Loan borrowers may be exhausted based on the revised withdrawal date.

For Washington State residents seeking information and resources about student loan repayment or seeking to submit a complaint related to your student loans or student loan servicer, please visit wsac. wa.gov/loan-advocacy or contact the Student Loan Advocate at loanadvocate@wsac.wa.gov.

Additional assistance for all students is available through the National Consumer Law Center's Student Loan Borrower Assistance. Their site contains information to contact the U.S. Department of Education Student Loan Ombudsman office, as well as several State Student Loan Ombudspersons or Advocates. These officials are a dedicated resource committed to providing information that is critical to many student loan borrowers.

#### Withdrawal from School

Students who discontinue their education at PNWU for any reason are required to complete a written request to withdraw and return any PNWU property within ten business days of discontinued education. Failure to complete the request to withdraw will result in a hold on all academic records and replacement charges for PNWU property not returned.

A student choosing to withdraw from the University automatically waives the right to an appeal of any disciplinary action or dismissal decision previously made by the Student Progress Committee and/or the program's chief academic officer. Guaranteed re-admission, based on withdrawal reason, may be voided upon failure to provide documentation in a timely manner. The dean or academic program director will make the final decision to grant a request for readmission and will notify the student of the decision in writing within 30 days of the request.

**Medical Withdrawal--** Granted to students who have a medically documented reason acceptable to the University. Students may apply for readmission. The appropriate Admission Committee

will review the readmission request, and make a recommendation to the dean or program director, who will make the final decision. If the dean, program director, or their designee accepts the request for readmission, the dean, program director, or their designee will determine class placement for the returning student. The individual requesting readmission will be notified of the decision in writing by Enrollment Services.

- - while on leave.
  - 2. Makes satisfactory academic progress at the sponsoring institution.
  - 3. Meets the minimum technical standards for admission.
  - appropriate dean or program director to discuss the request.
- Readmission is guaranteed, provided the student:
  - while on leave.
  - 2. Makes satisfactory academic progress at the sponsoring institution.
  - 3. Meets the minimum technical standards for admission.
  - 4. Submits to a criminal background check (CBC) and drug screen.
- director approval is required for personal withdrawal.
- personal withdrawal.

The student, will need to meet with Student Affairs and financial aid personnel to complete the exit process, return any PNWU property, and obtain information on how their withdrawal will affect any loan repayment.

Students withdrawing from the University will receive a grade of withdrawal (W) for all ungraded, registered courses.

#### **Tuition Refunds**

The request for a tuition refund requires an approved withdrawal from the University. No part of the tuition charges will be refunded to a student who withdraws for any reason after the third week from the first day of the academic term. All requests must be received before the close of business on Friday of the third week; proration is determined based on the date received.

Advanced Study Withdrawal-- Granted to osteopathic medical students who complete the first two years and wish to leave PNWU to pursue educational opportunities, such as PhD programs and/or research fellowships. Advanced study withdrawal will be granted by the dean for a

maximum of one year with possible renewal. Readmission is guaranteed, provided the student: 1. Has remained in compliance with PNWU's codes of academic and behavioral conduct

4. Submits to a criminal background check (CBC) and drug screen. Applicants for an advanced study withdrawal will be required to supply appropriate documentation as determined by the University. Students seeking advanced study withdrawal should initially meet with the

• Military Withdrawal-- Granted to students whose military reserve obligations may necessitate a period of absence from the academic program when they are called to extended active duty.

1. Has remained in compliance with PNWU's codes of academic and behavioral conduct

· Personal Withdrawal-- Granted to students who wish to voluntarily leave PNWU for personal reasons. Students withdrawn from PNWU are not eligible for readmission but may undertake the full application process if they desire to return to PNWU in the future. No dean or program

• Administrative Withdrawal - applies to those students no longer attending classes and not approved for a leave of absence, medical withdrawal, advanced study withdrawal, military, or The tuition refund shall be prorated as follows:

- 75 percent during the first week
- 50 percent during the second week
- 25 percent during the third week

#### Federal Aid Refund Calculations

PNWU will determine the earned and unearned portions of federal financial aid as of the date the student ceased attendance based on the amount of time the student spent in attendance. Up through the 60 percent point in each term a pro-rata schedule is used to determine the amount of federal financial aid funds the student earned at the time of withdrawal. Any unearned funds must be returned to the U.S. Department of Education and any amount owed to PNWU must be paid within 30 days.

The official date of the withdrawal is the date that Student Affairs receives the student's written request or the last date of attendance, whichever comes first. The percentage of time completed in the enrollment period is determined by dividing the number of days in the enrollment period into the number of days attended. If 60 percent of the term has been completed, there is no return of Title IV funds.

For Washington State residents seeking information and resources about student loan repayment or seeking to submit a complaint relating to your student loans or student loan servicer, please visit <u>www.</u> <u>wsac.wa.gov/loan-advocacy</u> or contact the Student Loan Advocate at <u>loanadvocate@wsac.wa.gov</u>.

Additional assistance for all students is available through the <u>https://www.studentloanborrowerassistance.</u> org/. Their site contains information to contact the <u>U.S. Department of Education Student Loan</u> <u>Ombudsman</u> office, as well as several State Student Loan Ombudsperson or Advocates. These officials are a dedicated resource committed to providing information that is critical to many student loan borrowers.

# Readmission

Students withdrawing from PNWU due to medical reasons, advanced study or extended military obligations (see military readmission section below) must apply for readmission. To apply for readmission, the applicant must submit a letter to Enrollment Services at least three months in advance of the time the applicant wishes to re-enroll. The letter must include reasons for withdrawal from school, status/ activities involved with since withdrawal, and reasons to be considered for readmission. The applicant for readmission may also include any supportive documentation they feel the Admission Committee should consider. Students who were granted a medical withdrawal will need to provide documentation from a qualified healthcare provider stating the student is able to resume academic pursuits without limitation.

The Admission Committee will consider the letter of application for readmission and may ask for letters of reference, medical documentation, or other documentation, and review the student's credentials on file with Enrollment Services. The Admission Committee has the right to conduct interviews, secure documentation, evaluate past grades/performance, and other University information to assist in their review of eligibility of the individual seeking readmission. Because the reason each applicant leaves is unique, the information required by the Admission Committee may vary. The Admission Committee makes a recommendation to the dean or program director. The dean, program director, or designee will establish placement and academic conditions, which will include academic probation, for students readmitted.

# Military Readmission

Any student whose absence from Pacific Northwest University of Health Sciences (PNWU) is necessitated by reason of service in the US Armed Forces, National Guard or other military reserve component shall be entitled to re-admission upon meeting any eligibility and re-admission requirements.

A student shall be permitted to withdraw from one or more courses without a failing grade, incomplete or other negative annotation, or alteration of grade point average, or be given an incomplete and be permitted to complete the course upon release from active duty, or continue and complete the course for full credit with any absences due to service treated as excused.

#### Eligibility

This policy applies only to US Military veterans seeking re-admission to the program which they previously attended; it does not apply to individuals seeking admission to a different school at PNWU. A student is eligible for re-admission under this provision if, during the leave, the student performed or will perform voluntary or involuntary active duty service in the US Armed Forces, including active duty for training and National Guard or Reserve service under federal authority, for a period of more than 30 consecutive days, and received a discharge other than dishonorable or bad conduct, or performed or will perform voluntary or involuntary duty with the national guard or any other military reserve component under state authority for a period exceeding 30 days, or is ordered to federal active military service. In general, the cumulative length of absence and all previous absences from the program for military service (service time only) must not exceed five years.

#### **Requirement of Notice**

A student planning to take a leave for military service must give advance written or verbal notice of military service to the dean, program director, or designee, unless such notice is precluded by military necessity. To be readmitted, notice (written or verbal) of intent to re-enroll must be given to the dean, program director, or designee no later than three years after the completion of the period of service. If recovering from a service-related injury or illness, the school must be notified no later than two years after recovery.

A student who does not submit a timely notification of intent or provide an attestation within the designated time limits may not be eligible for the benefits outlined herein.

#### **Readmission Requirements**

The school must allow the student to re-enroll in the next class or classes in the same program, with the same enrollment status, number of credits, and academic standing as when they were last in attendance at PNWU. The student may also request a later date of admission or, if unusual circumstances require it, the institution may admit the student at a later date. If the school determines that the student is not prepared to resume the program where they left off, the school must make reasonable efforts at no extra cost to the student to enable the student to resume and complete the program. Such reasonable efforts include, but are not limited to, providing a refresher course and allowing the student to retake a pretest, as long as they do not place an undue hardship on the school. If reasonable efforts are unsuccessful or the school determines that there are no reasonable efforts that the school can take, the school is not required to readmit the student. In evaluating re-admission, PNWU will comply with the requirements of any Washington State Law more beneficial to the student. Upon re-admission the dean or program.

If the program to which the student was admitted is no longer offered, the student must be admitted to the program that is most similar, unless the student requests or agrees to admission to a different program.

The re-applicant must provide proof of compliance with minimal technical standards, the codes of academic and behavioral conduct, criminal background check, and drug screen.

For the first academic year in which the student returns, they must be readmitted with the same tuition and fees charges the student was or would have been assessed for the academic year when the student left, unless there are sufficient veterans' educational benefits or other service member education benefits to pay the increased amount of tuition and fees. For subsequent academic years, the student may be charged the same tuition and fees as other students in the program.

#### Service for thirty days or less

A student who is a member of the Washington National Guard or any other military reserve or guard component who is ordered for a period of 30 days or less to either active or inactive state or federal service and as a result of that service, or follow-up medical treatment for injury incurred during that service, misses any class, test, examination, laboratory, or class day on which a written or oral assignment is due, or other event upon which a course grade or evaluation is based, is entitled to make up the class, test, examination, laboratory, presentation, or event without prejudice to the final course grade or evaluation. The makeup must be scheduled after the member's return from service and after a reasonable time for the student to prepare for the test, examination, laboratory, presentation, or event.

Class sessions a student misses due to performance of state or federal active or inactive military service must be counted as excused absences and may not be used to adversely impact the student's grade or standing in class.

If the faculty member teaching the course determines that the student has completed sufficient work and has demonstrated sufficient progress toward meeting course requirements to justify the grade without making up the class, test, examination, presentation, or other event, the grade may be awarded without the makeup, but the missed class, test, examination, laboratory, class day, presentation, or other event must not be used to adversely impact the student's grade or standing in the class.

# **Complaints Related to Accreditation**

Any individual may file a complaint regarding an accreditation standard, eligibility requirements, procedure, or policy. The complaint must be a written explanation of dissatisfaction or disagreement with an action, decision, or omission within the control or responsibility of PNWU relative to accreditation standards, eligibility requirements, procedure, or policy.

Should the accrediting agency find the student complaint related to accreditation valid, PNWU will abide by the procedures set forth by the accrediting agency to rectify the noncompliance to the accreditation standard(s). PNWU will maintain records of the receipt, adjudication, and resolution of such complaints.

At no time will any adverse action be allowed against the person(s) for filing a complaint.

# **Complaints of Program Integrity**

A student may file a complaint alleging a violation of consumer protection laws, licensure of postsecondary institutions, quality of education, or other state or accreditation requirements. The complaint must be a written explanation of dissatisfaction or disagreement with an action, decision, or omission within the control or responsibility of PNWU relative to program integrity.

At no time will any adverse action be allowed against the student(s) for filing a complaint.

# Reporting Suspected Wrongful Conduct

Wrongful conduct is any action or omission taken by or within the University that is illegal, fraudulent, or in violation of <u>University policies</u>, including the <u>Code of Conduct</u>, or procedures. Wrongful conduct includes, but is not limited to, violations of law including fraud; unauthorized use of University property or resources; fraudulent or dishonest financial reporting, bribery, or kickbacks; and research or other academic fraud.

Please visit the <u>Office of Compliance, Ethics, and Integrity Services</u> (CEIS) page at PNWU.edu to access the report form and for more information, or contact CEIS directly at <u>compliance-ethics@pnwu.edu</u>. The Reporting Suspected Wrongful Conduct form is not for appealing grades, accommodation decisions, dismissal, etc. Please see the applicable <u>Student Handbook</u> for those procedures.

# CAMPUS SECURITY

Campus Security office, or at the front desk in Butler-Haney Hall. Advising Campus Community About Sex Offenders

> PNWU advises the campus community on where to obtain law enforcement agency information concerning registered sex offenders.

# Animals on Campus

Animals are allowed on the PNWU campus as long as they are on a leash, under control of the handler, not a threat to other people, and do not bother or distract others. Owners must pick up after their animal(s). Other than service animals, the University retains the right to ask owners to remove their animal(s) at any time. If a service animal behaves in a way that poses a direct threat to the health or safety of others, has a history of such behavior, or is not under the control of the handler, that animal may be required to leave campus.

Animals are only allowed inside campus buildings for the following reasons:

- Service animals for the disabled.
- can be made.
- Animals approved for academic research.
- approved by the president or designee.

Other than service animals with service and vaccination tags, all other animals inside campus buildings must have documentation approved and submitted to Human Resources prior to building entry.

Campus community members are encouraged to report to Campus Security any animals that misbehave or handlers who mistreat their animals.

# **Campus Closure**

In the event that inclement weather or an emergency situation presents a risk to PNWU faculty, staff, students, visitors, and/or facilities, the president or designee will determine the appropriate campus response. Closing of the campus is a procedure that will differ depending on the timing of the decision to close and the expected length and severity of the weather or emergency situation. The essential factor in the decision is the safety of the PNWU faculty, staff, students, visitors, and facilities.

The Inclement Weather Planning Team, as outlined in the Emergency Operations Plan (EOP), will assess the need for campus closure. Only the president or designee may authorize the closure of campus, or segment of campus. In the event of a campus closure, the PNWU community will be notified via the Emergency Notification System as outlined in the EOP.

The Annual Campus Safety and Security Report may be found on the Campus Security webpage, at the

Conditions related to the <u>Americans with Disabilities Act</u> (ADA) where reasonable accommodations

Animals that are brought on campus for a purpose specifically approved and under conditions

# Campus Law Enforcement Authority

Limited campus law enforcement authority is granted to PNWU Campus Security. As such, PNWU security personnel act as agents for the University itself. PNWU security personnel do not have arrest powers; all criminal incidents are referred to local law enforcement, that being the Yakima County Sheriff's Office, who has jurisdiction on and adjacent to the PNWU campus. PNWU is also able to draw on the resources of the Yakima Police Department and the Washington State Patrol when necessary or appropriate.

PNWU Campus Security is granted authority to:

- monitor and record, via local law enforcement agencies, any criminal activity involving a PNWU student conducting business or acting through a recognized student club or organization offcampus
- review and enforce orders of protection, "no-contact" orders, restraining orders, or similar lawful orders issued by any court or by the University. Violations shall be reported to local law enforcement.
- require students and employees to comply with directives of campus security, law enforcement agencies, and any other University officials
- ask persons for identification to determine whether individuals have lawful business at PNWU campus sites
- enforce University policy, rules, and regulations as well as local, state, and federal laws, and report criminal violations to the proper authorities

Crime victims and witnesses are strongly encouraged to immediately report all criminal activity to the appropriate law enforcement agencies and PNWU security personnel. Prompt reporting will assure timely warning notices of campus crime and assist in full disclosure of crime statistics.

# **Disclosure of Crime Statistics**

PNWU annually collects, reports, and discloses crime statistics per the Clery Act as revised and effective July 1, 2015. These crimes are those that occur on or within the University's Clery geography and that are reported to local law enforcement agencies or to any campus security authority. These statistics must be reported to the Department of Education and be included in the annual <u>campus safety and security</u> report for the three most recent calendar years.

Each year, an email notification is made to all enrolled students and employees that includes an electronic link to access the Annual Security Report. Copies of the report may also be obtained by emailing and <u>Human Resources</u>.

# Firearms and Dangerous Weapons on Campus

PNWU is a weapons-free campus including buildings, grounds, and parking lots. Authorized exceptions include the Campus Security Manager and other security personnel.

Any items found or reported may be confiscated and reported to appropriate authorities.

# Personal Property

PNWU is not responsible for personal property that is lost, damaged, or stolen. If employees or students bring personal property/items/belongings onto University property, owned or leased, the employee or student is responsible for said property.

Personal property is not covered under the University's insurance. All personal property brought onto University property, owned or leased, may be inspected with just cause.

# Security Awareness Crime Prevention Programs

The University will make campus security and personal safety programs and campaigns available on a regular basis and at a minimum annually. Campus security programs and campaigns are designed to educate regarding campus security in general and how to prevent domestic violence, dating violence, sexual assault, and stalking.

# Security and Access of Campus Facilities

Pacific Northwest University of Health Sciences is a secure campus; access is restricted to authorized students, employees, and select contractors. PNWU issues proximity access cards that allow authorized individuals to enter buildings 24 hours a day. During an extended closure, only essential personnel will be granted access to campus property and facilities.

All guests are required to sign-in at the front desk of Butler-Haney Hall and obtain a visitor's pass from Security. A PNWU representative must escort guests at all times while on campus.

Campus facilities may have different hours of accessibility; in such cases, these areas will be secured and accessed by appropriate persons in accordance with operating schedules as developed by the department responsible for that facility.

# **Timely Warning and Emergency Notification**

PNWU will inform members of the campus about crimes and emergencies that have occurred or may impact or represent a threat to the campus community. PNWU will follow its emergency notification procedures as outlined in the Emergency Operations Plan.

# Parking

PNWU shall provide parking as a courtesy for employees, students, and visitors on campus. General parking spaces are open for all vehicles with any type of valid PNWU parking permit. PNWU shall not be responsible for any theft, vandalism, or other damage occurring while a vehicle is parked on campus.

Students will not park in staff parking areas during business hours. Staff parking is marked by posted signage. Staff parking reverts to general parking after business hours.

Employees and students shall report all vehicle accidents to Campus Security regardless of the severity.

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# FINANCIAL AID



#### 43 | Financial Aid

Enrollment Services is the primary agent to provide counseling and assistance to students with the necessary forms to obtain loans, scholarships, grants, and other forms of financial aid.

It is the student's primary responsibility to secure educational financing. This means that such things as supplying personal documentation, supplying family documentation, and ensuring that a student qualifies for loans by having a favorable credit report are the student's obligations. All documents requested by Enrollment Services must be received before financial aid will be processed. All <u>disbursements</u> will be made via direct deposit.

Health professions education is expensive. During schooling, most students are required to live at a modest level. The primary obligation for financing education lies with the student and the student's parents/spouse/partner. The federal and private agencies that make funds available for borrowing do so with the understanding that a student must sacrifice to achieve their degree.

Students accepted by PNWU and requiring financial aid must file the <u>Free Application for Federal Student</u> <u>Aid (FAFSA)</u> to assess aid eligibility. The needs analysis system set by the federal government ensures equity of treatment among all applicants. The University uses this needs analysis system to determine the amount of need-based financial assistance, loan amounts, and scholarship awards for which a student is eligible.

Financial aid as awarded or borrowed under the federal or private programs cannot exceed the PNWU estimated <u>cost of attendance</u>. Funding is available for a student's direct and indirect educational costs while they receive an education, but the student must be frugal and a good money manager. Students must carefully monitor their budgets.

#### Aid for DACA Students

DACA stands for Deferred Action for Childhood Arrivals. Students in this program, also known as Dreamers, came to the United States as children and are protected from deportation. Although DACA recipients may apply for a Social Security number, driver's license, and work permits, **DACA recipients are not eligible for federal student financial assistance.** Suggested resources can be found on the <u>PNWU DACA web page</u>.

#### Loans

As a rule, most people believe it is easier to borrow money for educational expenses. As a health care student, certain special <u>loan programs</u> may be available, the primary sources being the Stafford Loan Programs and the Graduate PLUS loan program. A student may not be eligible for the full amount based on their federal needs analysis, the PNWU estimated cost of attendance, or prior student loan indebtedness. The amount a student can borrow is based on the cost of their education and potential personal contributions, not on the student's desire for capital.

The Federal Direct Unsubsidized Stafford Loan and Federal Direct Graduate PLUS Loan accrue interest from disbursement date. Borrowers must consider the repayment implications and avoid excessive borrowing. PNWU has a federally mandated obligation to keep a student's indebtedness to a minimum. A student may request counseling through Enrollment Services while in school about the nature of his

or her debt and the projected payment schedule. Group sessions will be provided at least once each academic year.

Borrowing money from these programs is a privilege, not a right; regulations controlling these programs change periodically. A loan is not a gift or grant; it must be repaid. Student loans are only to be used for related educational expenses and personal living expenses.

Default is the failure of a borrower to make an installment payment when due or to meet other terms of the promissory note. If this happens, it is reasonable to conclude that the borrower no longer intends to honor the obligation to repay. Defaulted loans are reported to national credit agencies, thus affecting credit ratings and future ability to borrow money. Over-borrowing can cause defaulting on a student loan. This is why educational debt management is essential. PNWU encourages students to learn some basic budgeting techniques, how to cut costs, and how to live with less. If a student's loan goes into default, the University, the organization that holds the loan, the state, and the federal government may all take action to recover the money. The federal government and the loan agencies may deny a school's participation in the student loan programs or charge a school or its students a higher origination fee if the school's default rate is too high. The University will withhold the transcript of any individual if that individual is in arrears or in default under any loan or loan program, when such arrears or default adversely affects the University in any way.

For Washington State residents seeking information and resources about student loan repayment or seeking to submit a complaint relating to their student loans or student loan servicer, please visit <u>www.</u> <u>wsac.wa.gov/loan-advocacy</u> or contact the Student Loan Advocate at <u>loanadvocate@wsac.wa.gov</u>.

Additional assistance for all students is available through the <u>National Consumer Law Center's Student</u> <u>Loan Borrower Assistance</u>. Their site contains information to contact the <u>U.S. Department of Education</u> <u>Student Loan Ombudsman</u> office, as well as several State Student Loan Ombudsperson or Advocates. These officials are a dedicated resource committed to providing information that is critical to many student loan borrowers.

### Scholarships and Grants

Enrollment Services will provide students with information on <u>scholarship notices</u> that are sent to the office. It is the student's responsibility to notify Enrollment Services of any scholarship or grant awards received.

# Standards for Satisfactory Academic Progress

Federal law requires that all students receiving financial assistance from Title IV and Title VII funds maintain <u>satisfactory academic progress</u>. PNWU policy follows the qualitative (grade-based) academic standards that apply to all students and in addition, a required quantitative (time-related) standard.

While on warning or probation, the student may receive financial aid for one enrollment period. At the end of that period, the student must be in good standing or financial aid eligibility will be denied.

Enrollment Services will notify students who are ineligible for continued assistance and will provide them

with information regarding their academic status.

# Code of Conduct - Related to Financial Aid and Accounting

- 1. The University bans revenue-sharing arrangements with any lender. This is defined as any arrangement between a school and a lender that results in the lender paying a fee or other benefit, including a share of the profits, to the school, its officer, employees or agents, as a result of the school recommending the lender to its students or families of those students.
- 2. The University bans employees of the financial aid office receiving gifts from any lender, guaranty agency or loan servicer. This excludes:
  - a. Brochures or training material related to default aversion or financial literacy.
  - b. Food, training or informational materials as part of training as long as that training contributes to the professional development of those individuals attending the training.
  - c. Favorable terms and benefits to the student employed by the institution as long as those same terms are provided to all students at the institution.
  - d. Entrance and exit counseling as long as the institution's staff are in control and they do not promote the services of a specific lender.
  - e. Philanthropic contributions from a lender, guaranty agency, or servicer unrelated to education loans.
  - f. State education, grants, scholarships, or financial aid funds administered by or on behalf of the State.
- 3. The University bans contracting arrangements whereby any employee of the school's financial aid office may not accept any fee, payment or financial benefit as compensation for any type of consulting arrangement or contract to provide services to or on behalf of a lender relating to education loans.
- 4. The University prohibits steering borrowers to particular lenders or delaying loan certifications. This includes assigning any first-time borrower's loan to a particular lender as part of their award packaging or other methods.
- 5. The University prohibits offers of funds for private loans. Schools may not request or accept such offers. This includes any offer of funds for loans to students at the institution, including funds for an opportunity pool loan, in exchange for providing concessions or promises to the lender for a specific number of loans, or inclusion on a preferred lender list.
- 6. The University bans staffing assistance from a lender. Schools may not request or accept any assistance with call center staffing or financial aid office staffing. This excludes:
  - a. Professional development training for financial aid administrators.
  - b. Providing educational counseling materials, financial literacy materials, or debt management materials to borrowers, provided that such materials disclose to borrowers the identification of any lender that assisted in preparing or providing such materials.
  - c. Staffing services on a short-term, nonrecurring basis to assist the school with financial aidrelated functions during emergencies, including State-declared or federally-declared natural disasters, and other localized disasters and emergencies identified by the Secretary.
- 7. The University bans advisory board compensation. Employees of the institution may not receive anything of value from a lender, guarantor, or group in exchange for serving in this capacity. They may, however, accept reimbursement for reasonable expenses incurred while serving in this capacity.





The <u>PNWU Library</u> advances university engagement with biomedical literature resources to support education, research, and clinical practice. Available resources include online databases, digital health sciences tools, print and electronic books and journals, and anatomical models. Library staff members provide reference services, evidence-based literature class sessions, in-depth research assistance, copyright coaching, database orientations, and interlibrary loans.

The library is located next to the Grand Foyer in Butler-Haney Hall and is available during staffed hours Monday-Friday. Subject advisory guides and an online reference chat service are available remotely 24/7/365. Wireless connectivity is available for laptop computers and other Wi-Fi devices. The library also has public computer workstations for accessing its catalog and other resources by appointment

For more information on library resources, services, and policies, please see <u>library.pnwu.edu</u>, or contact the library staff. Phone: 509.249.7745 Email: <u>library@pnwu.edu</u>

# **Copyright Policy**

It is the policy of Pacific Northwest University of Health Sciences that all students comply with US Copyright Law as it relates to the use of copyright-protected works in the classroom and library at PNWU.

#### Summary of Civil and Criminal Penalties for Violation of Federal Copyright Laws

Copyright infringement is the act of exercising, without permission or legal authority, one or more of the exclusive rights granted to the copyright owner under section 106 of the Copyright Act (<u>Title 17 of the United States Code</u>). These rights include the right to reproduce or distribute a copyrighted work. In the file-sharing context, downloading or uploading substantial parts of a copyrighted work without authority constitutes an infringement. Penalties for copyright infringement include civil and criminal penalties. In general, anyone found liable for civil copyright infringement may be ordered to pay either actual damages or "statutory" damages affixed at not less than \$750 and not more than \$30,000 per work infringed. For "willful" infringement, a court may award up to \$150,000 per work infringed. A court can, in its discretion, also assess costs and attorneys' fees. For details, see Title 17, United States Code, Sections 504, 505. Willful copyright infringement can also result in criminal penalties, including imprisonment of up to five years and fines of up to \$250,000 per offense. For more information, please see the website of the US Copyright Office, especially their FAQ's

All students are required to read and abide by the PNWU Copyright Policy.

Technology Services partners with students, faculty, staff, and Board of Trustees in the areas of technology infrastructure and support, instructional design, and information security to provide innovative services that are integral to the delivery of the curriculum and to fulfill the University's mission and vision.

Students' main interaction with Technology Services is via the Help Desk, which is operated Monday-Friday, 7:30am to 5:30pm and is located in Butler-Haney Hall 105. Students may stop in, call 509-249-7777, or email <u>help@pnwu.edu</u>.

Technology Services provides support for student printing, classroom audiovisual needs, and institutional software and services like network access, Moodle, and Panopto. Technology Services can provide limited support for students' personal computing devices. Support for ExamSoft/Examplify and ProgressIQ is provided through the Assessment Office.

Loaner equipment is available for checkout by students for limited time use that includes cables, chargers, tablets, and laptops at the Help Desk.

#### Laptops

Students are required to have a laptop that meets the <u>minimum hardware and software requirements</u>. Laptop purchases are the responsibility of each student; financial aid is available for the purchase once during the student's program.

# **Privacy Screens**

Students are required to have a privacy screen for their iPad or laptop during assessments. The privacy screen must meet the <u>minimum requirements</u>. Privacy screen purchases are the responsibility of each student; financial aid is available for one privacy screen purchase during the student's program.

# Acceptable Use of University Electronic Communications, Equipment, Supplies, and Assets

Students are provided access to technology resources to support their studies and University-sanctioned activities. University-issued email accounts are the official means of University communications. Resources may not be used in a manner that violates the law, for private commercial activities that are not approved by the University, for personal private gain, or for political campaigning and similar activities that are inconsistent with the University's mission.

# TECHNOLOGY SERVICES

#### JITIO ND FEES

Tuition is due and payable in full at registration unless special arrangements have been made with **Enrollment Services**.

Any students using U.S. Department of Veterans Affairs (VA) Post 9/11 G.I. Bill® (Ch. 33), Vocational Rehabilitation and Employment (Ch. 31), or Dependents Education Assistance/DEA (Ch. 35) benefits, with payment to the University pending from the VA, the University will not:

- Prevent the student's enrollment:
- Assess a late penalty fee to;
- Require student secure alternative or additional funding;

However, to gualify for this provision, such students will be required to:

- Produce the Certificate of Eligibility by the first day of term;
- Provide a written request to be certified;
- Provide additional information needed to properly certify their enrollment

GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government website at http://www.benefits. va.gov/gibill.

All tuition and fees are subject to change annually. The PNWU Board of Trustees reserves the right to change the schedule of tuition and fees without advance notice, to make such changes applicable to present as well as future students, and to establish additional fees or charges for special services whenever, in their opinion, such actions are deemed advisable.

No course will be credited toward promotion, graduation, or subsequent credit if a student has not paid the required tuition, including any additional tuition incurred by repeating any portion of the academic program.

### **Educational Resources**

PNWU tuition includes educational resources required for the curriculum based on the following:

- OR
- students by the seventh day of the payment period.
- the items and the failure to do so may impact their academic success.
  - designee to ensure standards are met.
  - payment period by;
    - days prior to the payment period; and

\*GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by VA is available at the official U.S. government website at http://www.benefits.va.gov/gibill.

• Deny their access to any resources (access to classes, libraries, or other institutional facilities) available to other students who have satisfied their tuition and fee bills to the institution.

• Arrangements with the publishers or other entities make the required items available in a format not available or accessible to the student from a source not authorized by PNWU.

• Required resources are purchased at or below competitive market rates, and provided to the

Students may opt-out of the way educational resources are provided by PNWU by signing the academic program Cost Opt-Out Request form. Students acknowledge responsibility of obtaining

Student obtained educational resources may be reviewed by the Department Chair or their

♦ PNWU provides a way for a student to obtain those supplies by the seventh day of a

» Disbursing Title IV, HEA program funds for which the student is eligible up to ten

» A Title IV, HEA credit balance is paid directly to the student as soon as possible, usually within five business days.

The cost of PNWU provided educational resources are amortized over the length of the program to keep tuition costs consistent. If a student discontinues their education either through withdrawal or dismissal the books and equipment must be returned, or the remaining cost paid. Replacement of PNWU provided educational resources is at the expense of the student.

# Fees

#### **Application Fee**

A nonrefundable application fee is payable upon submission of a supplemental application for admission.

- College of Osteopathic Medicine application fee of \$85
- School of Physical Therapy application fee of \$50
- Master of Arts in Medical Sciences application fee of \$50

#### Acceptance Fee

A nonrefundable acceptance fee is payable after a student has been offered admission to PNWU. Payment is credited toward tuition upon matriculation.

- College of Osteopathic Medicine acceptance fee of \$1,000
- School of Physical Therapy acceptance fee of \$500
- Master of Arts in Medical Sciences acceptance fee of \$500

#### Criminal Background Check Fee

A criminal background check (CBC) is required prior to matriculation and prior to beginning off campus clinical courses. The cost of the CBC is established by the company contracted by PNWU to provide this service. Instructions for the criminal background check will be delivered via email.

#### Diploma Replacement Fee

The fee for each additional or replacement diploma is \$25.

#### Diploma Electronic Fee

The fee to receive or send an electronic diploma is \$25.

#### **Drug Screening Fee**

A random drug screening may be required prior to matriculation and whenever it is requested of a current student. The cost of the drug screen is established by the company providing the service and is the responsibility of the student to pay.

#### **End of Clinical Course Retest Fee**

An osteopathic medical student who has failed the required end of clinical course examination (COMAT) must remediate by retaking the examination, at their own expense of a \$47 retest fee.

#### Library Fee

Students are required to pay for any overdue, lost, or damaged materials from the PNWU Library collection or from interlibrary loan. Fees are variable according to the infraction. See the <u>Library fines web page</u> for details.

#### NSF Fee

A fee of \$25 is charged for returned checks, rejected ACH payments, etc..

#### **Transcript Fee**

A fee of \$10.00 is charged for each requested transcript, not to exceed \$30.00 for same recipient.

#### **Tuition Late Fee**

Registration obligates students for payment of all tuition. If tuition is not paid by the due date, students will be assessed a \$50 late fee and be liable for any other reasonable collection costs and charges. Students with unpaid University charges may not proceed or register for classes and may be discharged from PNWU. Books, supplies and grades will be held until payment is received.

# COLLEGE OF OSTEOPATHIC MEDICINE (COM)



# Osteopathic Medicine

The United States' fully licensed osteopathic physicians (DO) practice the entire scope of modern medicine, bringing a patient-centered, holistic, hands-on approach to diagnosing and treating illness and injury. Osteopathic physicians may choose any specialty, prescribe drugs, perform surgeries, and practice medicine anywhere in the United States. DOs bring the additional benefits of osteopathic manipulative techniques to diagnose and treat patients. DOs work in partnership with patients to help them achieve a high level of wellness by focusing on health education, injury, and disease prevention.

# History

Osteopathic medicine is a distinctive form of medical care founded on the philosophy that all body systems are interrelated and dependent upon one another for good health. This philosophy was developed in 1874 by Dr. Andrew Taylor Still, who pioneered the concept of wellness and recognized the importance of treating illness within the context of the whole body.

Andrew Taylor Still was born in Virginia in 1828, the son of a Methodist minister and physician. At an early age, Still decided to follow in his father's footsteps as a physician. After studying medicine and serving an apprenticeship under his father, Still became a licensed M.D. in the state of Missouri. Later, in the early 1860s, he completed additional coursework at the College of Physicians and Surgeons in Kansas City, Missouri. He went on to serve as a surgeon in the Union Army during the Civil War.

After the Civil War and following the death of three of his children from meningitis in 1864, Still concluded that the orthodox medical practices of his day were frequently ineffective and sometimes harmful. He devoted the next ten years of his life to studying the human body and finding better ways to treat disease.

His research and clinical observations led him to believe that the musculoskeletal system played a vital role in health and disease and that the body contained all of the elements needed to maintain health, if properly stimulated. Still believed that by correcting problems in the body's structure through the use of manual techniques now known as osteopathic manipulative treatment, the body's ability to function and to heal itself could be greatly improved. He also promoted the idea of preventive medicine and endorsed the philosophy that physicians should focus on treating the whole patient, rather than just the disease.

These beliefs formed the basis of a new medical approach-osteopathic medicine. Based on this philosophy, Dr. Still opened the first school of osteopathic medicine in Kirksville, Missouri in 1892.

# Philosophy

Osteopathic medicine is a separate and distinct branch of medical practice that is based on a set of philosophical principles and stresses a comprehensive approach to the maintenance of health. Osteopathic medical education is unique in its emphasis on the neuromusculoskeletal system and its utility in the diagnosis and treatment of disease. It is the unobstructed, interrelationship of all the body's systems by which health is maintained and by which disease is prevented. Osteopathic medicine makes use of the following principles that assist the osteopathic physician to look for health, and not simply treat a disease state:

a. The human body is a dynamic unit of function.

- b. The human organism is self-regulating and self-healing.
- c. Structure (anatomy) and function (physiology) are reciprocally interrelated.
- diagnosis and treatment of disease.

# The Osteopathic Physician's Oath

I do hereby affirm my loyalty to the profession I am about to enter. I will be mindful always of my great responsibility to preserve the health and the life of my patients, to retain their confidence and respect both as a physician and a friend who will guard their secrets with scrupulous honor and fidelity, to perform faithfully my professional duties, to employ only those recognized methods of treatment consistent with good judgment, and with my skill and ability, keeping in mind always nature's laws and the body's inherent capacity for recovery.

I will be ever vigilant in aiding the general welfare of the community, sustaining its laws and institutions, not engaging in those practices which will in any way bring shame or discredit upon myself or my profession. I will give no drugs for deadly purposes to any person, though it be asked of me. I will endeavor to work in accord with my colleagues in a spirit of progressive cooperation, and never by word or by act cast imputations upon them or their rightful practices.

I will look with respect and esteem upon all those who have taught me my art. To my college I will be loyal and strive always for its best interests and for the interests of the students who will come after me. I will be ever alert to further the application of basic biologic truths to the healing arts and to develop the principles of osteopathy which were first enunciated by Andrew Taylor Still.

# **PNWU-COM Mission**

#### Mission

Pacific Northwest University of Health Sciences College of Osteopathic Medicine educates and trains students to become osteopathic physicians that provide research-driven guality care to communities of the Northwest, particularly rural and medically underserved populations.

# **COM Admissions**

PNWU-COM seeks to admit students compatible with the University's mission and who have the prerequisite knowledge, skills, and abilities to assure a reasonable probability of success. Enrollment Services acts as the primary agent for applicants and has an admissions process that responds to applicant and University needs.

# **Application Requirements**

The minimum age to matriculate at PNWU-COM is 18 years of age and the applicant must be a US Citizen, permanent resident, or Deferred Action for Childhood Arrivals (DACA) status. Application to PNWU-COM is made by submitting a primary application through the American Association of Colleges of Osteopathic Medicine Application System (AACOMAS). Applicants must designate PNWU-COM on

d. The function of the musculoskeletal system goes beyond support and may be vital in the

the primary application in order for PNWU to receive the application.

An invitation to complete a supplemental application may be sent to the applicant after the primary application has been reviewed.

The PNWU-COM Admission Committee will review files only after all of the following materials have been received.

- 1. A completed AACOMAS application
- 2. An official Medical College Admissions Test (MCAT) score. Applicants must take the exam and have the official scores sent to ACCOMAS. MCAT test scores are valid for three years from the original test date. The test must be taken no later than January 31 of the year medical school starts.
- 3. A completed PNWU supplemental application, including a nonrefundable supplemental application fee of \$85 made payable to PNWU
- 4. A letter of recommendation from each of the following sources, which must be written within two years prior to making application:
  - a. A physician (preferably a D.O. who is a member of the AOA);
  - b. A science faculty member who has evaluated the applicant's post-secondary science course work; and
  - c. A pre-medical source (a pre-medical advisor or committee), military supervisor/ commanding officer in a health profession, research supervisor, a second science faculty member, a second physician, or other health professional supervisor.

The PNWU-COM Admission Committee will consider applications from all qualified individuals; however, to meet the mission of the College of Osteopathic Medicine, preference is given to applicants from Alaska, Idaho, Montana, Oregon, Washington, and rural and/or medically underserved areas of the country. Applicants to the College are considered on their intellectual ability, scholastic achievement, commitment, and suitability to succeed in the study of osteopathic medicine. The College follows the non-discrimination policy and the requirements of federal and state law including Title IX. The College does not discriminate against applicants based on socio-economic background.

### **Review and Notification**

The major criteria for rating applicants are academic excellence, commitment to osteopathic primary care, commitment to practice medicine in an underserved area, and personal characteristics. Academic excellence is measured by assessing results of the MCAT and academic performance. The degree of difficulty of the program that the applicant studied is also considered. No interview is involved in this assessment.

After the initial assessment, selected applicants are invited to a formal personal interview. After the interview, the Admission Committee reviews the applicant files and make recommendations to the dean. Applicants are notified as soon as final admission decisions are made.

An acceptance fee is required from successful applicants.

Those accepted on or after October 15 will have until December 14 (or 30 days after receiving an offer of admission, whichever date is later);

those accepted on or after December 15 will have 30 days;

- those accepted on or after January 15 will have 14 days; and
- those accepted on or after June 15 may be asked for an immediate deposit.

PNWU is a private institution and encourages applications from gualified students who are interested in pursuing a career in osteopathic medicine. Qualified applicants from Alaska, Idaho, Montana, Oregon, and Washington, and rural and/or medically underserved areas of the country will be given preference for admission to PNWU.

Note: Intentional misrepresentation or omission of information relative to scholastic records, test records, criminal background, etc. will subject the applicant to rescinded admission or a student to dismissal. The University reserves the right to deny admission to any applicant for any reason it deems sufficient.

# Recommending a Student for Admission

Persons wishing to recommend a student for admission should write to the Admission Committee on behalf of the applicant. This letter will be given full consideration when the applicant's file is evaluated.

#### Admission Requirements

Acceptance is conditional until all required documentation is received and completed to PNWU's satisfaction. Final, official transcripts from all previously attended institutions must be on file prior to matriculation.

Although PNWU-COM does not usually defer admission, requests submitted to the Admission Committee will be reviewed and a recommendation made to the dean. The dean makes the final decision regarding deferral requests.

The requirements for admission are in this section and on **PNWU.edu**.

- college or university.
  - ♦ English Composition and Literature
  - ♦ General Chemistry
  - ♦ Organic Chemistry
  - ♦ Physics
  - ♦ Biological Sciences
- A cleared criminal background check
- A cleared drug screening, if randomly selected

• A baccalaureate, masters, or doctoral degree from a regionally accredited college or university. Satisfactory completion of the following college courses, including laboratory work, must be passed (grade of C or above is recommended) and taken for credit at a regionally accredited

> 6 Semester Hours 8 Semester Hours 8 Semester Hours (4 hours of which can be Biochemistry) 8 Semester Hours 12 Semester Hours

• The ability to use a personal or network computer (PC) is an important skill that will assist students with PNWU course work. It is strongly recommended that each entering student have a good working knowledge of common PC use and applications. PNWU utilizes the latest in Microsoft Office® and Windows® applications. See the minimum laptop requirements on PNWU.edu

- Documentation of required immunizationsDocumentation of health care insurance
- Final official transcripts are required from each college or university ever attended. The transcript must come directly from the college or university. Foreign transcripts must be evaluated for US equivalence by an approved evaluation service.
- Matriculation forms and surveys; such as ID badge forms, parking permit forms, etc.
  Complete annual on-line training modules; such as HIPAA, hazardous materials, blood borne pathogens, Title IX, and research training
- Complete pre-orientation modules
- Required to attend a new student orientation •



# **COM** Academics

# COM Academic Calendar

This is an overview; a day-by-day schedule will be available to each student.

	2023 - 2024
<b>Summer Term Begins</b> Fourth-Year Students Third-Year Students	May 22, 2023 July 3, 2023
Last Day to Withdraw with a Partial Tuition Refund Fourth-Year Students Third-Year Students	June 9, 2023 July 21, 2023
Summer Term Ends	August 11, 2023
Summer Term Grades Due	August 18, 2023
Orientation for First-Year Students	Week of July 31, 2023
Fall Term Begins Classes begin for Second-Year Students Classes begin for First-Year Students	July 31, 2023 August 7, 2023
Last Day to Withdraw with a Partial Refund: Second-Year Students First-Year Students	August 18, 2023 August 25, 2023
Labor Day (No on-campus classes)	September 4, 2023
Constitution Day	September 18, 2023
Mid-Term for Fall Term	October 6, 2023
Veterans Day (No on-campus classes)	November 10, 2023
Thanksgiving Break (No on-campus classes)	November 22-24, 2023
Fall Term Ends Second-Year Students First-Year Students	December 8, 2023 December 15, 2023
Fall Term Grades Due	December 22, 2023
Spring Term Begins	January 8, 2024
Martin Luther King, Jr. Day (No on-campus classes)	January 15, 2024
Last Day to Withdraw with a Partial Refund	January 26, 2024
Presidents' Day (No on-campus classes)	March 11-15, 2024
Spring Term Ends	May 17, 2024

#### Commencement

Spring Term Grades Due

Memorial Day (No on-campus classes)

# **Conference Attendance and Advocacy**

#### **Conference Attendance**

Conference attendance should promote academic development and should not interfere with academic progress. Students on academic alert, warning or probation, or who have professional conduct violations may be denied the privilege to attend. First year students may be approved to attend conferences only in spring semester.

#### Advocacy

#### Washington state DO Day on the Hill

PNWU and the Student Osteopathic Medical Association (SOMA) in partnership with Washington Osteopathic Medical Association (WOMA) supports attendance at the annual DO Day in Olympia, WA.

#### AACOM DO Day on the Hill

PNWU and the Student Osteopathic Medical Association (SOMA) supports attendance at the AACOM DO Day on the Hill in Washington, DC each spring. AACOM works closely with SOMA, and the Edu to Med students at PNWU to provide training on current health policy issues prior to the event.

PNWU promotes all students learning to be advocates for our profession. Becoming aware of health policy issues concerns, and functions is important to develop skills for advocating.

# Grades

#### Grading System:

PNWU-COM uses a Pass (P)/Fail (F) grading system; no quality points per hour are awarded on the student transcript. Student may appeal a grade using the grade appeal process detailed in the Student Handbook.

P= Pass H= Pass with Honors (P\* used from 2008 to Spring 2021) F= Fail I= Incomplete (changes to a fail one year from the date assigned if not completed) IP= In Progress W= Withdrawn WP= Withdrawn, Passing WF= Withdrawn, Fail AU= Audit

#### For Examinations:

Determination of a passing score will be based on the mean minus one standard deviation from the mean, with a minimum score of 65 percent. If the mean minus one standard deviation from the mean

May 18, 2024
May 24, 2024
May 27, 2024

is greater than 70 percent, 70 percent will be set as the passing score. If the mean minus one standard deviation from the mean is lower than 65 percent, 65 percent will be set as the passing score.

#### For Courses:

Grades will be determined based on the contribution of the scores for all examinations and other assessments divided by the total of all points associated with those assessments. Consideration will be given for contributions to the final grade by inclusion of quizzes and other assignments as per the course syllabus.

Student's percentage grades will be used for purposes of ranking, not reported on the transcript. Ranking is determined at the end of the second academic year. Incomplete course grades may be made up under the supervision of the associate dean for preclinical education; however, no grade above 70 percent will be granted. Under extenuating circumstances beyond the student's control, incomplete grades may be made up with 70 percent or better. Such exceptions would be considered upon the recommendation of the Student Progress Committee.

Students must remediate all failures/incompletes prior to beginning the next successive academic year. The student is not in good academic standing until the failures/incompletes are successfully remediated in a timely manner determined by the Student Progress Committee. See the section on Remediation for details about the remediation process and how remediated grades will be noted on the student's transcript.

The course director will submit a final course grade report within five business days after the final course assessment for preclinical courses. The course grade report will include the pass or fail. Students may access an unofficial transcript and grade report on-line at any time through PowerCAMPUS <u>Self-Service</u>.

For clinical courses, failure to complete logs, evaluations, and rotation exams within 60 days of the last day of the rotation will result in an academic standing of alert, and a grade of incomplete will be given. At the end of the academic year, rotations that remain incomplete will be given a grade of fail (F). Rotations ending within 60 days of the end of the academic year will have the full 60 days to complete logs, evaluations, and rotation exams. Students will be withdrawn from rotations until all grades are remediated and documentation is current.

Grading policies for each individual course will be provided within the course syllabus, including course description, learning outcomes and objectives.

The results of examinations and reports concerning attendance, conduct, and potential professional attributes are submitted to the Student Progress Committee by Student Affairs. The Committee determines the student's eligibility for promotion and graduation.

#### Honors

Honors will be designated based on core rotation exams, completion of assignments, and clinical performance.

# COM Academic Progress

Satisfactory academic progress, measured at the end of each academic year, occurs when the student is passing all required courses, completes 67 percent of their cumulative attempted credits, is on track to complete their degree within 150 percent of their four-year program, and has passed required board exams. A student who is not making academic progress is not eligible for federal Title IV student financial aid.

A student failing to meet one or more of the standards of progress during the academic year will be placed on Academic Warning. While on Academic Warning, the student may receive financial aid. At the end of spring term, the student must be in good standing or may appeal to be placed on a probation status.

Course withdrawals and repeats are allowed as part of a probation status and count as attempted credits. All periods of the student's enrollment count when assessing progress. Failure of a single course by more than ten percentage points below the course final passing percent, or failure of two courses in a single academic year will result in an automatic dismissal without the opportunity for remediation. No student may advance a year at PNWU-COM with a failing or incomplete grade in any required course. No DO student may advance to clinical rotations until passing COMLEX-USA Level 1. A DO student who has failed COMLEX-USA Level 1 may require time away, may have financial aid affected, and may require an adjustment to the timeline to complete graduation requirements.

Students may access their grade report from the PowerCAMPUS Self-Service system at the close of each academic term. Their Academic Standing status will be reported on the grade report. The student will receive a letter of Academic Standing if placed on Alert, Warning, or Probation status. Probation and dismissal letters will become part of the permanent academic record.

#### 1. Alert:

**First- and Second-Year Students:** occurs automatically when a student's mid-term grade is failing or mid-course grade is failing for a course that is eight weeks or longer. **Third- and Fourth-Year Students:** occurs upon failure of a Comprehensive Osteopathic Medical Achievement Test (COMAT) exam, or failure to complete assignments from COM. Also occurs upon failure to complete logs, evaluations, and rotation exams within 60 days of the last day of the rotation.

#### 2. Warning:

occurs automatically at the end of fall term when a student does not meet academic progress, or fails a course that ends before the end of term, or fails the first attempt of any level of board exam.

#### 3. Probation:

occurs when the Student Progress Committee assigns this status to a student who has successfully appealed to be reinstated after not achieving academic progress at the end of the academic year, or has not maintained professional and/or ethical conduct.

A student on Warning or Probation status may not participate in PNWU sponsored extracurricular events or organizations, is not eligible for PNWU sanctioned travel, is not permitted to be listed on any active research study, and may not run for or hold the position of executive, class, or club officer. At the discretion of the Student Progress Committee, warning or probation status may include additional restrictions from

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activities the Committee deems detrimental to academic performance.

The imposed academic standing will be in effect until the student is in good academic standing. Good academic standing is regained by successful remediation of the failed standard of progress.

Academic Alert and Warning shall have no effect on a student's financial aid and will not appear on the transcript. Probation status may affect a student's eligibility for financial aid and will not appear on the transcript. Please refer to the Financial Aid policies for more information.

Student Progress Committee meetings with students are private and confidential including, but not limited to, the names of participants, proceedings, discussion, minutes, and findings. The following are prohibited in all Student Progress Committee meetings unless otherwise authorized in writing by the dean and Student Progress Committee chairperson: 1) electronic recording of the meeting, except for official minutes; 2) legal counsel; and 3) uninvited individuals.

# Appeal

The student meets with the Student Progress Committee to appeal dismissal by presenting any extenuating circumstances which directly contributed to poor academic performance. The appeal must explain why the student failed to make satisfactory progress and what has changed in the situation that will allow them to make satisfactory progress during the next term. The student must appear in person or via video conferencing to make a personal statement and answer any questions by the committee.

If the Student Progress Committee determines the student should be able to meet the academic progress standards by the end of the subsequent term, the student will be placed on probation. If the determination is that the student will require more than one term to meet academic progress standards the student will be placed on probation and an adjusted academic plan developed. The student will be reviewed at the end of each term to determine if meeting academic progress standards.

If the Student Progress Committee recommends upholding dismissal, the student will be notified by certified letter and secure email. If the student does not believe due process was properly followed the student may appeal the dismissal decision by submitting a detailed letter to the dean within five business days after receiving the dismissal notice. The decision of the dean is final, and the student is notified by certified letter and secure email.

#### Remediation

Remediation of a single failed preclinical course within 10% of the established passing score will occur according to the COM academic calendar. Remediation of a single failed clinical course will be to repeat the clinical course. Failure of a course remediation will result in an automatic dismissal. Remediation of a failed board exam will occur under the direction of the board preparation coordinator and a repeat of the board exam will be attempted.

#### **Regional Site Placement**

PNWU third- and fourth-year curriculum delivery occurs through the regional sites located in a five-state

target area of: Alaska, Idaho, Montana, Oregon, and Washington. Students will be assigned to a regional site through the site selection process. Regional site placement procedures are designed to support the mission of PNWU-COM, thus meeting the health care workforce needs of the rural and medically underserved in the Northwest.

In the admission process, preference is given to students from within the Northwest region, rural, or medically underserved areas. It is the goal of regional site placement to return students to areas within the Northwest region where they have significant ties as much as possible. In this process, students from outside the Northwest region may be placed in regional sites that strengthen PNWU-COM's program rather than areas of their preference.

# **PNWU-COM Educational Objectives**

The PNWU-COM Educational Objectives within the osteopathic medical education curriculum are guided by the National Board of Osteopathic Medical Examiners (NBOME, 2011) Fundamental Osteopathic Medical Competency Domains. The required courses of the osteopathic medical education program explicitly address the following domains:

1. Osteopathic Principles & Practice and Osteopathic Manipulative Treatment function (physiology).

Osteopathic philosophy emphasizes the following principles: (1) The human being is a dynamic unit of function; (2) The body possesses self-regulatory mechanisms that are self-healing in nature; (3) Structure and function are interrelated at all levels; and (4) Rational treatment is based on these principles (Glossary of Osteopathic Terminology, 2009).

Osteopathic manipulative treatment (OMT): the therapeutic application of manually guided forces by an osteopathic physician to improve physiologic function and/or support homeostasis that has been altered by somatic dysfunction. OMT employs a variety of techniques (Glossary of Osteopathic Terminology, 2009).

Somatic dysfunction: impaired or altered function of related components of the somatic (body framework) system: skeletal, arthrodial and myofascial structures, and their related vascular, lymphatic, and neural elements. Somatic dysfunction is treatable using osteopathic manipulative treatment (Glossary of Osteopathic Terminology, 2009).

#### 2. Patient Care

Patient care is the development, maintenance, and conclusion of a therapeutic physician-patient relationship in a manner that has the best interest of the patient in mind. This involves determining and monitoring the nature of a patient's concern or complaint; appropriately incorporating osteopathic principles and practice and osteopathic manipulative treatment (OMT); and implementing effective, evidence-based, and mutually agreed upon diagnostic and patient care plans, including appropriate patient education and follow-up. In the service of the highest guality of patient care, promotion of wellness, and prevention of disease, the osteopathic physician must be able to appropriately lead a health care team and foster effective communication between health care professionals.

Osteopathic principles and practice: a concept of health care supported by expanding scientific knowledge that embraces the concept of the unity of the living organism's structure (anatomy) and

#### 3. Application of Knowledge for Medical Practice

The application of knowledge for medical practice is the understanding and application of osteopathic, biomedical, clinical, epidemiologic, biomechanical, social, and behavioral sciences in the context of patient-centered care. This also includes critical-thinking skills required for safe and effective medical practice, including the cognitive skills of understanding, comprehension, application, analysis, synthesis, and evaluation.

#### 4. Practice-Based Learning and Improvement in Medicine

Practice-based learning and improvement is the continuous evaluation of osteopathic clinical practice, utilizing evidence-based medicine approaches to develop best practices that will result in optimal patient care outcomes.

#### 5. Interpersonal and Communication Skills in the Practice of Medicine

Interpersonal and communication skills for medical practice consist of incorporating knowledge, behaviors, and attitudes required: (1) to determine the nature of a patient's concern or complaint; (2) to develop, maintain, and conclude the therapeutic relationship; and (3) to facilitate patient education and implementation of negotiated diagnostic and care plans. These skills include active listening involving verbal and nonverbal behaviors and effective documentation and synthesis of clinical findings and impressions in written and electronic format. This set of knowledge, skills, and attitudes extends to the medical interview and to communication with the patient, family members, or caregivers, physician colleagues, and other members of the interprofessional collaborative team. Essential for osteopathic medical practice is that the approach be holistic, comprehensive, and patient-centered, contributing to an understanding of the patient's perspective and facilitating trust and a therapeutic physician-patient relationship.

#### 6. Professionalism in the Practice of Medicine

Medical professionalism is a duty to consistently demonstrate behaviors that uphold the highest moral and ethical standards in the conduct of medical education, training, research, and practice. This includes a commitment to continuous learning and the exhibition of personal and social accountability.

#### 7. Systems-Based Practice in Medicine

Systems-based practice is an approach incorporating awareness of and responsiveness to the larger context and systems of health care. In addition, it is the ability to effectively identify and integrate system resources to provide medical care that is of optimal value to individuals and to society at large.

# **PNWU-COM Educational Outcomes**

Each of the PNWU-COM educational objectives includes a set of discrete educational outcomes defined in course syllabi and measured through a variety of comprehensive assessment strategies which include: objective examinations in courses, written assignments, student portfolios, clinical skills demonstrations (standardized patients, Objective Structured Clinical Examination [OSCE], simulations), national standardized tests (Comprehensive Osteopathic Medical Self-Assessment Examination [COMSAE], Comprehensive Osteopathic Medical Achievement Tests [COMAT], Comprehensive Osteopathic Medical Licensing Examination [COMLEX]), small-group case studies, preceptor evaluations, and individual case presentations. The set of discrete PNWU-COM educational outcomes within course syllabi are guided by

overarching NBOME domain outcomes and listed below.

Upon graduation from PNWU-COM, students will be able to:

- 2. Patient Care

Provide patient-centered care that is culturally responsive, compassionate, and appropriate for the effective treatment of illness and promotion of health.

- 3. Application of Knowledge for Medical Practice to optimize patient care.
- 4. Practice-Based Learning and Improvement in Medicine outcomes.
- 5. Interpersonal and Communication Skills in the Practice of Medicine:
- 6. Professionalism in the Practice of Medicine ethical principles and cultural responsiveness to diverse beliefs and customs.
- 7. Systems-Based Practice in Medicine patient and local and global communities.

### Credit Hour Definition

The credit hour formulas used for determining credit hours at PNWU adheres to the definition of a credit hour as defined by the U.S. Department of Education and as provided in the glossary of the American Osteopathic Association Commission on Osteopathic College Accreditation (AOA COCA) COM Accreditation Standards and Procedures Manual.

Preclinical courses the credit hours are determined by the following methods:

Each contact hour of lecture, presentation, or hour designated to complete an on-line presentation has an expected out of classroom study time of two hours. One credit hour equals 15 contact hours.

Teaching Laboratory contact hours differ in credit as they do not require the number of hours of preparation

#### 1. Osteopathic Principles & Practice (OPP) and Osteopathic Manipulative Treatment (OMT)

Demonstrate knowledge of osteopathic principles and practice, and demonstrate and apply knowledge of somatic dysfunction diagnosis and Osteopathic Manipulative Treatment in the clinical setting.

Demonstrate an understanding and application of the evolving osteopathic, biomedical, clinical, epidemiological, biomechanical, and cognitive (e.g. epidemiological and social-behavioral) sciences

Demonstrate the ability to continuously evaluate patient care practices, scientific evidence, and personal beliefs and biases as they relate to improving the care of patients and optimizing patient

Demonstrate the ability to consistently interact respectfully, empathetically, and professionally with patients, families, allied health care providers, staff, and colleagues, to optimize patient outcomes.

Demonstrate a commitment to the highest standards of professional responsibilities and adhere to

Effectively utilize available health care system resources to provide optimal health care to the individual

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outside of classroom activity. Credit hours for laboratory are considered a one to one anticipated time in laboratory to time outside of laboratory to prepare. One credit hour is assigned to each 30 hours of laboratory time.

Anatomy course laboratory sessions, early clinical experiences (ECE), simulation laboratory experiences, clinical laboratory experiences, or OMM Lab receive a one to one anticipated time in laboratory to time outside of laboratory to prepare. One credit hour is assigned to each 30 hours of such time.

#### Credit hours for Clinical Rotations are determined as follows:

Four credit hours are awarded for the approximate 160 to 180 contact hours students spend on each fourweek clinical rotation (or internship, externship, international experience or clinical research experience). The contact hours awarded on a clinical rotation are estimated to have a one to one ratio as preparation for the student is usually spent on the rotation or in completing the required on-line curriculum.

### Doctor of Osteopathic Medicine Degree Requirements

The curriculum of medical school differs from that found in other graduate programs in that the curriculum progressively builds. This requires the student to complete certain courses in order or progression to comprehend the foundation on which the clinical curriculum builds. Academic progress requires the student complete each academic year in the progression offered.

Course	Course #	Credits
First-Year Courses		
Gross Anatomy & Basic Neuroanatomy	ANAT 505	4.5
Gross Anatomy & Basic Neuroanatomy	ANAT 506	5.5
Art of Clinical Practice I	FM 501	6.0
Art of Clinical Practice II	FM 502	6.0
Osteopathic Principles & Practice I	OPP 501	3.0
Osteopathic Principles & Practice I	OPP 502	3.0
Fundamentals of Pharmacology	PHARM 599	3.0
Scientific Foundations of Medicine	BIOMED 501	9.0
Musculoskeletal & Integumentary System	CLIN 504	6.0
Cardiovascular System	CLIN 510	7.0
Respiratory System	CLIN 512	6.0
Total First-Year Credits		59.0
Second-Year Courses		
Art of Clinical Practice III	FM 601	5.0
Art of Clinical Practice IV	FM 602	4.0
Clerkship Prep	FM 603	3.0
Osteopathic Principles & Practice II	OPP 601	2.5
Osteopathic Principles & Practice II	OPP 602	2.5
Board Exam Preparation	CLIN 604	2.5
Renal System	CLIN 616	6.0

Genitourinary/Reproductive System Behavioral Medicine Hematology/Oncology/Infectious Disease Gastrointestinal System Nervous System Endocrine System **Total Second-Year Credits** Total First- & Second-Year Credits Third- & Fourth-Year Courses Behavioral Medicine Clinical Skills III Emergency Medicine Family Medicine Internal Medicine Women's Health Osteopathic Principles & Practice Pediatrics-Neonate Surgery Primary Care Core (select from) **Electives - Internal Medicine** Electives - Surgery Electives - Unrestricted Total Third- & Fourth-Year Credits **Total Degree Credits** 

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CLIN 603	7.5
CLIN 618	3.0
CLIN 625	6.5
CLIN 627	6.5
CLIN 628	7.0
CLIN 629	4.5
	60.5
	119.5
BEHSC 701	4.0
CLIN 701	0.5
EM 701	4.0
FM 701	6.0
IM 701	6.0
OBGYN 701	6.0
OPP 701	4.0
PED 701	6.0
SURG 701	6.0
BEHSC 705 EM 702 EM 703 FM 702 IM 702 OBGYN 702 OPP 703 PED 702 SURG 702 (2 w maximum) SURG 713 (2 w maximum)	veek
IM 704, IM 706 708, IM 710, IN IM 712, IM 713 714, IM 715, IN IM 717, IM 719 801	й 711, 3, IM И 716, 9, IM
SURG 705, SUI 708, SURG 710 SURG 712, SUI 715, SURG 801	), RG I
	28.0
	84.5
	204.0

### **Graduation Requirements**

A student who has fulfilled all the academic requirements within 150 percent of their four-year program, except where an exception is required by law, will be granted the degree of Doctor of Osteopathic Medicine provided the student:

- Has complied with all the curricular, legal, and financial requirements of the University
- Attends, in person, the commencement ceremony
- Has met requirements for graduation that include passage of COMLEX-USA Level 1, and 2CE
- Is at least 21 years of age
- Has demonstrated the ethical, personal, and professional qualities deemed necessary for the successful, continued study and practice of osteopathic medicine
- Can meet the minimum technical standards
- Has demonstrated suitability for the practice of medicine as evidenced by the assumption of responsibility for patient care and integrity in the conduct of clinical activities
- Has obtained approval from the Student Progress Committee, faculty, dean, president, and Board of Trustees of PNWU
- Is free from any outstanding medical debts to the University's affiliated hospitals or clinics
- Has attended and completed required exit sessions as determined by PNWU e.g.. loan counseling, etc.

### **Requirements for Practice**

Each recipient of the DO degree must fulfill the requirements of the state licensing board of the state in which the physician chooses to practice. These requirements vary widely and are regulated by the laws of each state. Refer to the Federation of State Medical Boards, <u>https://www.fsmb.org/contact-a-state-medical-board/</u> websites for details.





# **COM Course Information**

Note: Rotations with the same discipline and number may be combined in order to meet the required rotation. The numbers in parenthesis following the course title indicate the course credits.

#### ANAT 505/506, Gross Anatomy & Basic Neuroanatomy (4.5/5.5)

This combined lecture and laboratory course introduces students to the normal macroscopic structure of the human body, including the brain and spinal cord. A regional approach is taken, whereby all structures within a body region are studied together, with an emphasis on functionally and clinically relevant anatomy and neuroanatomy. In laboratory, students collaborate in small groups to complete a thorough cadaveric dissection, including dissection of the brain and spinal cord. Normal radiologic anatomy is integrated into each regional topic.

#### ANAT 601, Anatomy Research (6 - 8)

The purpose of this course is to provide the student with an introduction to basic biomedical research methods with hands-on participation in a novel research project under the guidance of a research scientist. The student will learn how to: 1) search and evaluate the scientific literature for relevant information, 2) design a small research project, 3) perform various biomedical research techniques, 4) complete the planned studies, 5) prepare a final report on these studies, and 6) give an oral presentation of this research at PNWU. This is 6 - 8-week elective course offered during the summer to students who have a strong academic record after the 1st, 2nd, or 3rd year at PNWU. The number of students allowed to enroll each summer will vary. An announcement detailing the application process for this course will be sent out to students at least one month prior to the application deadline.

#### ANAT 799, Anatomy Student Scholars (6 or 18)

The purpose of this course is to provide the student with increased learning opportunities in the medical anatomical sciences of gross anatomy, developmental anatomy, histology, and neuroscience, while at the same time providing the student with opportunities to develop solid teaching skills in these disciplines, and to perform medical research.

### BEHSC 701, Behavioral Medicine (2 - 4)

The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This rotation is designed for students to learn and practice skills necessary for working with patients in a mental health setting. Rapport-building skills and mental health patients are emphasized. Students should develop an awareness of the effects of biological, developmental, sociological, ethnic, and economic background on the presenting problems of patients. Students are expected to establish professional working relationships with members of the multidisciplinary mental health treatment team. Students will develop the ability to communicate effectively with other professionals, support an atmosphere of collegiality, and expand both their medical education as well as personal growth.

### BEHSC 702, Substance Abuse (2 - 4)

Substance Abuse is a subspecialty elective in the area of behavioral medicine. In today's cultural setting, it is becoming increasingly important for practitioners to possess the clinical knowledge, skills and behavior necessary for the management of patients adversely affected by alcohol and other drugs, and to understand the specific issues related to HIV infection and cross cultural or gender differences.

#### BEHSC 703, Behavioral Medicine Elective (2 - 4)

A subspecialty elective in the area of behavioral medicine. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### BEHSC 705, Behavioral Medicine (2 - 6)

A behavioral medicine primary care core rotation. Each student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. The rotation is designed for students to learn and practice skills necessary for working with patients in a mental health setting. Rapport-building skills with mental health patients are emphasized. Students should develop an awareness of the effects of biological, developmental, sociological, ethnic, and economic background on the presenting problems of patients.

#### **BIOMED 501, Scientific Foundations of Medicine (9)**

This 12-week, first-year course provides students with the scientific foundation they will use throughout the rest of the curriculum. Students will learn the structure and function of the human body's most basic constituents and the roles these components play in normal body function and pathological processes. Major elements of the course include key concepts in molecular biology, biochemistry, embryology, genetics, histology, immunology, microbiology, neuroscience, nutrition and physiology with a special emphasis on integration, regulation and pathophysiology. The course also introduces students to concepts in pathology, laboratory and bio-molecular methods, and clinical case scenarios. Content is presented via lecture, lab, faculty directed study, and interactive learning sessions.

#### CLIN 504, Musculoskeletal & Integumentary System (6)

This course is an integrated, multidisciplinary study of the musculoskeletal and integumentary systems in health and disease. Emphasis is on pharmacology, pathology, nutrition, and microbiology as related to the diagnosis and clinical management of musculoskeletal and integumentary disorders.

#### CLIN 510, Cardiovascular System (7)

The Cardiovascular System course is provided as a requirement of the first-year curriculum at PNWU. The course presents a multidimensional approach to understanding normal cardiovascular function and the prevention, presentation, diagnosis (including EKG interpretation), and treatment of the most common clinical entities in cardiovascular disease.

#### CLIN 512, Respiratory System (6)

The teaching program of this course has been designed to encompass the overall goals of the institution in assisting the students to acquire competency in clinical problems related to the respiratory system. This course is part of the year-one curriculum.

#### CLIN 513, Directed Study (.5 - 6)

The Directed Study course is administered by the appropriate Associate Dean or their designee on a case-by-case basis. This course is limited to eight weeks for OMS3 students and four weeks for OMS4 students with a mandatory follow-up with the Student Progress Committee.

#### CLIN 603, Genitourinary/Reproductive System (7.5)

The Genitourinary/Reproductive System course is comprised of formal didactic lectures in a lecture hall setting, interactive learning sessions, and clinical skills laboratory. The interactive sessions will require preparation of the assigned material prior to class to fully participate in the session.

#### CLIN 604, Board Exam Preparation (2.5)

This course will introduce students to the basic processes involved with registering and preparing for COMLEX-USA Level 1. Activities include live question-and-answer information sessions, web-based support and direction, practice tests, instructional sessions on board review calendar building and study strategies, and completion of a COMSAE. Lists and access to board resources are provided as well as question banks.

#### CLIN 616, Renal System (6.0)

This required second-year course integrates histology, physiology, pathology, medicine, and the pharmacology related to renal diseases. The objective is to prepare the student to present a differential diagnosis and an appropriate diagnostic and therapeutic plan for patients with acute or chronic diseases of the urinary system.

#### CLIN 618, Behavioral Medicine (3)

The Behavioral Medicine course is provided as a requirement of the second year curriculum. The course presents a multidimensional approach to the understanding of the most common clinical entities in psychiatry and behavioral medicine. Additional topics are signs, symptoms, diagnosis, treatment and the biopsychosocial aspects of behavioral medicine. Several of these sections are conducted in work format, allowing maximum participation and interaction of students and faculty.

### CLIN 625, Hematology/Oncology/Infectious Disease (6.5)

This course is designed to assist students in acquiring knowledge and competency in both the basic and clinical sciences, in disorders of red and white blood cells, hemostasis and oncology, and basics of infectious disease including HIV. The faculty will emphasize pathology, pharmacology, internal medicine, immunology, clinical manifestations, diagnosis, differential diagnosis, and treatment components in the forms of lectures, directed self-study, and clinical integration learning sessions (CILs).

### CLIN 627, Gastrointestinal System (6.5)

This multidisciplinary course is designed to assist students in acquiring knowledge and competency in disorders of the gastrointestinal system, pancreas, liver and biliary tract. The student will examine the basic biology and diseases of the digestive system. The course utilizes a comprehensive teaching approach to presenting the common and/or significant clinical problems and disorders of the gastrointestinal system. The faculty will emphasize pathophysiology, clinical manifestations, diagnosis, differential diagnosis, and treatment of these gastrointestinal disorders. Instruction will include lectures, faculty-directed self-study, clinical integration learning sessions (CILs), and virtual microscopy labs.

#### CLIN 628, Nervous System (7)

The Nervous System course is provided as a requirement of the second year curriculum. The course presents a multidimensional approach to the understanding of the most common clinical disorders of the nervous system. Additional topics are physical examination principles of nervous disorders. Attention will be given to diagnosis, pathophysiology, treatment and outcome measurement. Several of these sections are conducted in workshops/laboratories format, allowing maximum participation and interaction of students and faculty.

#### CLIN 629, Endocrine System (4.5)

This course is an integrated, multidisciplinary study of the endocrine system in health and disease. Emphasis is on pharmacology, pathology, nutrition, and microbiology as related to the diagnosis and clinical management of endocrine disorders. The course presents a multidimensional approach to the understanding of the most common clinical entities in endocrine disease. The course presents the pathophysiology, pharmaceutical or surgical treatments, and adult and pediatric presentations of endocrine diseases. A central format of the course is the presentation of clinical correlations. This format consists of presentation of clinical cases that range from the prototypical to the atypical. Students are given study guestions to guide their study on critical components of the diagnosis or treatment of the clinical correlation cases.

#### CLIN 701, Clinical Skills III (.5)

This course will enhance the students skills in obtaining a history, developing a rapport and bedside manner, physical diagnosis, integration of OMM, critical thinking, development of differential diagnoses and SOAP note writing skills. This course is designed to fulfill the NBOME requirement that all Colleges of Osteopathic Medicine evaluate and verify the fundamental osteopathic clinical skill competencies of students prior to graduation and to ensure their graduates are fully prepared for entrance into graduate medical education.

#### CLIN 703, Clinical Intensive (variable)

The clinical intensive rotation nis offered to select students. The course is offered on a rotating basis and will occur in two- to four-week blocks. The clinical intensive course will better enable the student to process the following; history taking, physical examination, medical decision making with treatment plan, SOAP note writing, and verbal presentations.

#### ELEC 702, Individualized Elective Rotation (2 - 4)

An elective rotation in an area not currently being offered as a regular rotation selection. The student will be assigned to a physician trainer or a group of physician trainers who are practicing physician in the specialty. The goals and objectives of the course must be defined and approved by the Associate Dean of Clinical Education or their designee. This is typically used for unrestricted elective rotations. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### ELEC 703, Global Health (2 - 8)

The rotation provides broad exposure to both public health and direct clinical experiences in a variety of settings, both within the US and abroad. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### ELEC 704, Bioethics (2 - 4)

The purpose of this Bioethics & Primary Care course is to provide the student with exposure to bioethics in contemporary medicine. To accomplish this, the rotation will allow students to examine the secularity of modern medicine, the structures of modern bioethical frameworks, and the theological and philosophical arguments used to support bioethical positions. Students will examine the complex cultural, medical, ethical, and philosophical issues integral to bioethics and primary care.

#### EM 701, Emergency Medicine (4)

An emergency medicine core rotation is required. The student will be assigned to a physician trainer or a group of emergency medicine trainers who are practicing in their specialty. Exposure to patients in the clinical setting the student will learn interview and documentation skills. The student may be given the opportunity to participate in procedures as the physician trainer determines their readiness.

### EM 702, Emergency Medicine Elective (2 – 4)

Emergency Medicine is a fourth year elective two to four-week rotation. The student will be assigned to a physician trainer or a group of emergency medicine trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### EM 703, Emergency Medicine (2 - 6)

An emergency medicine primary care core rotation. The student will be assigned to a physician trainer or a group of emergency medicine trainers who are practicing in their specialty. Exposure to patients in the clinical setting the student will earn interview and documentation skills. The student may be given the opportunity to participate in procedures as the physician trainer determines the student's readiness.

### FM 801, Emergency Medicine Sub-Internship (variable)

This Emergency Medicine clerkship is scheduled with a preceptor who is an expert in this field. It is intended to enhance the student's ability to recognize emergent conditions and initiate evaluation and stabilizing treatment, to better equip students for starting internship. Students will experience the dayto-day activities of clinicians as they assist in patient care. Exposure to patients in the clinical setting will give the student an opportunity to practice interview, examination, documentation and presentation skills. These activities help develop student's clinical reasoning and provide opportunities to learn necessary professional activities. Students may be afforded by the preceptor the opportunity to participate in procedures as the preceptor deems appropriate. The curriculum for this rotation is based on nationally recognized recommendations from Clerkship Directors of Emergency Medicine. For further reading see CDEM Curriculum (saem.org)

#### FM 501/502, Art of Clinical Practice I & II (6/6)

The course provides students the knowledge and skills to perform a proper history and physical examination, as well as effective SOAP note documentation and Oral Case Presentations. The student will be assessed on the knowledge related to these goals and the practical skills related to: (1) Interviewing and history taking, (2) Performing the physical examination, (3) Demonstrating professional/ethical behavior, (4) Making clinical judgments, and (5) Clinical communication (e.g. SOAP note writing and Oral Presentation). Clinical diagnostic reasoning and medical decision-making will be emphasized in team-based learning sessions moderated by a clinical faculty member, as well as standardized patient (SP) encounters, simulation scenarios (SIM), and community-based early clinical encounters (ECE), interprofessional education (IPE), and interprofessional collaborative practice (ICP).

Further, the purpose of this course is to empower the students with the basic understanding of how sociocultural patterns of behaviors, personalities, developmental disabilities, ethics, and communication will affect patient care and clinical decision making. Curriculum goals regarding lifelong learning, professionalism, self-care, ethics, and social and community contexts of care will also be addressed. Other topics include biological correlates of behavior; learning and behavioral change; lifespan development; communication and interaction; group processes; family and community sociocultural patterns of behavior: and developmental disabilities. This course includes a review of behavioral risk factors, disease study design, and biostatistics to facilitate recognition of evidence-based medicine and appropriate patient-oriented/problem-based articles that are applicable to clinical practice.

### FM 601/602, Art of Clinical Practice III & IV (5/4)

The Art of Clinical Practice III and IV courses are designed to teach students the skills of a practicing osteopathic physician. The course prepares students with the clinical reasoning and skills necessary

for patient care as outlined in AACOM's Entrustable Professional Activities (EPAs), including: gathering a history and performing a physical examination; prioritizing a differential diagnosis following a clinical encounter; recommending and interpreting common diagnostic and screening tests; entering and discussing orders and prescriptions; documenting a clinical encounter in the patient record; providing an oral presentation of a clinical encounter; forming clinical questions and retrieving evidence to advance patient care; giving or receiving a patient handover to transition care responsibility; collaborating as a member of an interprofessional team; recognizing a patient requiring urgent or emergent care and initiating evaluation and management; obtaining informed consent for tests and/or procedures; performing general procedures of a physician; and identifying system failures and contributing to a culture of safety and improvement.

#### FM 603, Clerkship Prep (3)

The Clerkship Prep Course occurs is the final course prior to clinical rotations. In this course students will learn new physical exam skills and techniques necessary for rotations as well as review skills taught throughout preclinical courses. The goal of the course is to provide students with the final skills necessary for success in clinical rotations.

#### FM 701/702, Family Medicine (2 - 6)

A family medicine core rotation is required. Each student will be assigned to specific rotations in family medicine. The rotations in family medicine will expand the student's ability to integrate information obtained from the medical history, physical examination, osteopathic structural examination and appropriate diagnostic modalities into definitive diagnoses.

#### FM 703, Hospice-Palliative Care (2 - 4)

Palliative Care is available as a subspecialty elective in the area of family medicine or internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in specialty. This rotation provides exposure to treatment and care of end of life patients. Cross-listed with IM 714. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### FM 704, Family Medicine Elective (2 - 4)

A two to four-week Family Medicine elective rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

### FM 705, Sports Medicine (2 - 4)

Sports Medicine is available as a subspecialty elective in family medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

### FM 706, Military Medicine (2 - 4)

The purpose of this two- to six-week rotation is to provide the student with exposure to experiences related to military medical officer obligations in peacetime, leadership/discipline, disasters, stabilization/ field exercises, triage, and combat medical environments. To accomplish this, the rotation provides broad exposure to professionalism and ethical issues in the military environment as well as in the medical field and where appropriate exposure to medical problems related to military members as well as their families can occur. To achieve rotation objectives, the student is expected to apply the concepts of diagnosis and management for all phases of patient care and, if relevant, develop a working knowledge of both inpatient and outpatient treatment modalities as related to military medical care in both peacetime and the combat environment. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### FM 801, Family Medicine Sub-Internship (2 - 4)

Students will serve as interns for family medicine services associated with residency programs under the supervision of family medicine residents and attending physicians. Students will be able to perform an initial assessment of patients under consideration for admission to the family medicine service. Students will be able to implement diagnostic and therapeutic plans taking into account evidence-based information and patient preferences. Based on their demonstrated knowledge in osteopathic medicine, skills and attitudes, students will be able to participate on an inpatient family medicine team with an advanced degree of independence and responsibility in preparation for their first year of residency. Students will learn to provide osteopathic patient-centered inpatient care and document that care appropriately. Students will be able to provide continuity of care to a limited number of patients who they care for in both the hospital and the ambulatory setting. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 701/702, Internal Medicine (2 - 6)

An internal medicine core rotation is required. The specialty of internal medicine consists of the diagnosis, treatment, and prevention of all diseases of the body (excluding surgery and obstetrics) with emphasis on the internal organs. The program goal for the student in internal medicine is to develop the skills of thorough history taking and physical examination with the subsequent ability to develop a differential diagnosis. These skills will be developed and critiqued by bedside teaching and by a variety of academic lectures. Emphasis will also be placed on the effective utilization of hospital services and the development of post-hospitalization treatment plans. This rotation may include hospitalist programs affiliated with core sites.

#### IM 703, Allergy & Immunology (2 - 4)

The study and management of allergy and immunology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 704, Cardiovascular Disease (2 - 4)

The study and management of cardiovascular disease is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 705, Dermatology (2 - 4)

Dermatology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 706, Endocrinology (2 - 4)

Endocrinology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This

course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 707, Wound Care (2 - 4)

The purpose of this rotation is to provide the student with an overview of the clinical specialty. This rotation is not intended to transform the student into a specialist, but rather it is to provide the clinical clerk a survey of the specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 708, Gastroenterology (2 - 4)

Gastroenterology is a subspecialty elective rotation in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 709, Geriatrics (2 - 4)

Geriatrics is available as an elective in internal medicine. An osteopathic physician must recognize the special needs of the geriatric patient. As aging is a normal physiological process, so the care of the geriatric patient is the normal extension of the physician's responsibility. Therefore, exposure to the geriatric patient should be an integral part of the experience of the student, particularly in the longitudinal care experience and the internal medicine rotations. Training should take place at all the training sites, the hospital, nursing home, the patient's home, a geriatric assessment unit, or any other site appropriate for the care of the geriatric patient. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 710, Hematology/Oncology (2 - 4)

Hematology/Oncology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 711. Infectious Disease (2 - 4)

The study and management of infectious disease is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 712, Nephrology (2 - 4)

Nephrology is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 713, Neurology (2 - 4)

Neurology is a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. The purpose of the rotation is to develop decision-making cognitive skills and apply didactic material in a clinical setting. Upon completion of this rotation, the student should have improved basic skills in physical diagnosis, gained familiarity and ancillary diagnostic procedures, determined indications for appropriate laboratory and diagnostic tests, and assisted in the management of neurologic problems. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 714, Hospice-Palliative Care (2 - 4)

Palliative Care is available as a subspecialty elective in the area of family medicine or internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in specialty. This rotation provides exposure to treatment and care of end of life patients. Cross-listed with FM 714. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 715, Pulmonary (2 - 4)

The study and management of pulmonary disorders is available as a subspecialty elective rotation in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 716, Intensive Care (2 - 4)

The intensive care rotation is meant to give the student a more in-depth experience in a hospital intensive care unit. The student will work as part of an intensive care team. To accomplish this, the rotation provides broad exposure to both chronic and acute problems, experience in appropriate consultation, outpatient diagnostic testing, patient education and other procedures. To achieve rotation objectives, the student is expected to apply the concepts of diagnosis and management for all phases of care and, if relevant, develop a working knowledge of both inpatient and outpatient treatment modalities as applicable to discharge planning. Throughout the rotation, students will assume as much responsibility for patient care as is commensurate with their preparedness. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 717, Rheumatology/Immunology (2 - 4)

Rheumatology/Immunology is available as a subspecialty elective rotation in internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 719, Internal Medicine Elective (2 - 4)

A two- or four-week Internal Medicine elective rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 727, Physical Medicine & Rehabilitation (2 - 4)

Physical Medicine & Rehabilitation is available as a subspecialty elective in the area of internal medicine. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### IM 801, Internal Medicine Sub-Internship (2 - 4)

The purpose of this two to four-week experience is to provide the student with exposure to commonly encountered cases in Internal Medicine Sub-Internship. To accomplish this, the rotation provides broad exposure to both chronic and acute problems, experience in appropriate consultation, outpatient diagnostic testing, patient education and other procedures. To achieve rotation objectives, the student is expected to apply the concepts of diagnosis and management for all phases of outpatient care. If relevant, develop a working knowledge of both inpatient and outpatient treatment modalities. Throughout the rotation, students will assume as much responsibility for patient care as is commensurate with

their preparedness. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### OBGYN 701/702, Women's Health (2 - 6)

A required core curriculum rotation, the goal of the Women's Health rotation is to acquaint the student with the field of female reproductive medicine and the broad-based issues surrounding women's health. The student will be expected to demonstrate a basic knowledge of the social, physiological, and physical factors that make women unique. The student is expected to be able to identify the normal course of female maturation and development, including menarche, pregnancy, and menopause.

#### **OBGYN 703, Women's Health Elective (2 - 4)**

A two or four-week Women's Health elective rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### OBGYN 801, Women's Health Sub-Internship (2 - 4)

The obstetrical gynecological sub-internship is meant to give the student who is interested in OB/GYN a more in-depth experience in the field of obstetrics and gynecology. Instruction for students will allow them responsibility and experience in caring for patients with obstetrical and gynecological problems. This instruction, experience and responsibility allows the development of judgment in clinical skills in utilizing and interpreting laboratory and diagnostic studies, and to rationally manage uncomplicated obstetrical and gynecologic patients. Instruction enhances the medical knowledge of the student in clinical physiology and pathology of obstetrical and gynecologic conditions. This instruction will include the natural history, prevalence, manifestations, differential diagnosis, and the rational therapeutics and management of the condition. Preventive and rehabilitative features for each condition are emphasized. The student will enhance their osteopathic patient care and management skills by learning the following: history taking, physical examination, diagnostic procedures, problem identification and formulation, recording of data, problem solving skills, and appropriate patient-physician and patient family relationships. In addition instruction will provide responsibility and experience for students, in patient education and health maintenance, specifically in the areas of marriage counseling, sex education, and family planning. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### OPP 501/502, Osteopathic Principles & Practice I (3/3)

Osteopathic Principles and Practice I is a course comprised of formal didactic instruction (cognitive component) and clinical skills training (CST, psychomotor component), including Osteopathic Manipulative Treatment (OMT, psychomotor component), conducted in a large teaching laboratory setting. Skills and knowledge are taught and examined in a cumulative and comprehensive manner. The course will familiarize students with the history of osteopathy, the philosophical basis of the profession, and the anatomical and physiological foundation of osteopathic medicine in the treatment of somatic dysfunction relative to disease processes. Students will be taught how to palpate both male and female anatomy with the goal of diagnosing somatic dysfunction of soft tissues, bones, and joints, how to understand the biomechanics of the various components of the neuromusculoskeletal system, as well as how to manage their treatment using a variety of models. Students will be taught how to integrate osteopathic principles with clinical medicine in a wide variety of specialties, including family medicine, pediatrics, internal medicine, gynecology/obstetrics, and general surgery.

### OPP 601/602, Osteopathic Principles & Practice II (2.5/2.5)

Osteopathic Principles and Practice II is a continuation of OPP I that builds upon the first-year knowledge base, while challenging students to apply their training using a more complex clinically related paradigm during year two. Osteopathic Principles and Practice II is a course comprised of formal didactic instruction (cognitive component) and clinical skills training (CST, psychomotor component), including Osteopathic Manipulation Treatment (OMT, psychomotor component) conducted in a large teaching laboratory setting. Skills and knowledge are taught and examined in a cumulative and comprehensive manner. The course will continue to familiarize students with the philosophical basis of the profession, as well as the anatomical and physiological foundation of osteopathic medicine in the treatment of somatic dysfunction relative to disease processes. Students will be taught how to properly palpate both male and female anatomy with the goal of diagnosing somatic dysfunction of soft tissues, bones, and joints, how to understand the biomechanics of the various components of the neuromusculoskeletal system, as well as how to manage their treatment using a variety of models. Students will be taught how to integrate osteopathic principles and practice (OPP) with clinical medicine in a wide variety of specialties, including family medicine, pediatrics, internal medicine, gynecology/obstetrics, an general surgery.

#### **OPP 701, Osteopathic Principles & Practice (4)**

A four-week required core rotation. Osteopathic education must play a key role in the curriculum. Training should be provided in both the inpatient and ambulatory care settings, where possible. In developing a format to teach these principles, it will be stressed that osteopathic care does not imply specific manipulative techniques for specific problems. Rather, this format should enable the student to integrate the osteopathic philosophy into daily patient care. The philosophy is centered on the concept of the body unity, the interrelationship of structure and function, and the body's inherent neuropsychoimmunological healing capacity. The approach of holistic medicine is one that will be emphasized throughout the extern program. Students may participate in one of three tracks, which include a two to four-week clinic rotation, four weeks with OPP faculty at PNWU, or longitudinal instruction throughout the third year.

### **OPP 702, Osteopathic Principles & Practice Elective (2 - 4)**

A two to four-week elective rotation required. Osteopathic education must play a key role in the curriculum. Training should be provided in both the inpatient and ambulatory care settings, where possible. In developing a format to teach these principles, it will be stressed that osteopathic care does not imply specific manipulative techniques for specific problems. Rather, this format should enable the student to integrate the osteopathic philosophy into daily patient care. The philosophy is centered on the concept of the body unity, the interrelationship of structure and function and the body's inherent neuropsychoimmunological healing capacity. The approach of holistic medicine is one that will be emphasized throughout the extern program. This course may be repeated with different preceptors to obtain additional clinical exposure.

### OPP 703, Osteopathic Manipulative Medicine (2 - 6)

An osteopathic manipulative medicine primary care core rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. The student will experience the day to day activities of clinicians as they assist in the care of their patients. Exposure to patients in the clinic setting will give the student opportunity to practice interview, examination, documentation and presentation skills. These activities help develop student's clinical reasoning and provide opportunities to learn necessary professional activities. The student may be afforded by the preceptor the opportunity to participate in procedures as the preceptor determines the student's readiness. The curriculum for this rotation is based on nationally recognized recommendations from the Osteopathic Practices and

Principles Department and Educational Council on Osteopathic Principles.

#### **OPP 799, Osteopathic Principles & Practice III (6 or 18)**

The goal of this course is to instruct medical students in an advanced understanding of Osteopathic Principles and Practices necessary for integration into clinical practice as they are prepared to be teaching assistants for first-, second-, and third-year osteopathic medical students. Emphasis will be placed on development of didactic and laboratory teaching skills to assist in preparation of first- and second-year students to become competent clinical practitioners in the context of osteopathic primary care.

### PED 701/702, Pediatrics (2 - 6)

A pediatric core rotation is required. The goal of the pediatric rotation is to initiate the student into the field of working with infants, children, and adolescents. It is expected that the student become familiar with the diagnosis and treatment of common pediatric diseases and disorders. The student is expected to assist in the management of the pediatric patient under close supervision by the attending physician. The student's responsibility in assisting with a particular pediatric case will depend on the individual's experience and ability.

#### PED 703, Adolescent Medicine (2 - 4)

Adolescent medicine is available as a subspecialty elective in the area of pediatrics. The student will be assigned to a trainer or a group of physician trainers who are practicing physician in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### PED 704, Pediatrics Elective (2 - 4)

An elective rotation in the area of pediatrics. The student will be assigned to a physician trainer or a group of physician trainers who are practicing physician in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### PED 705, Neonatology (2 - 4)

Neonatology is available as a subspecialty elective in the area of pediatrics. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### PED 707, Newborn Elective (2 - 4)

The purpose of this experience is to provide the student with exposure to the development of the newborn from the perspective of a physician and parent. This rotation is not intended to transform the student into a pediatrician, but rather it is to provide the clinical clerk a survey of neonate development. In this ambulatory rotation, the student is encouraged to apply concepts of diagnosis and management to infants. In addition, the student will gain knowledge about normal growth and development of the pediatric patient. The student will be required to submit a daily log of infant development and a paper. agreed upon by the Chair of Pediatrics and the student.

#### PED 801, Pediatrics Sub-Internship (2 - 4)

Students will serve as interns for pediatrics associated with residency programs under the supervision of residents and attending physicians. Students will be able to perform an initial assessment of pediatric patients under consideration for admission. Students will be able to implement diagnostic and therapeutic plans taking into account evidence-based information appropriate for pediatric patients. Based on their demonstrated knowledge in osteopathic medicine, skills, and attitudes, students will be able to participate on the pediatrics team with an advanced degree of independence and responsibility in preparation for their first year of residency. Students will learn to provide osteopathic patient-centered inpatient care and document that care appropriately. Students will be able to provide continuity of care to a limited number of pediatric patients who they care for in both the hospital and the ambulatory setting. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### PHARM 599, Fundamentals of Pharmacology (3)

This lecture course introduces the basic principles for rational and effective drug therapy.

### RSRCH 601, Research/Scholarly Activity Elective (2 or 6)

Students who are accepted to this course first will discuss possible research/scholarly activity topic areas with the faculty. The student then will search and evaluate the biomedical and scientific literature as they formulate the details of their project. After planning the project with the guidance of the faculty member, the student will perform the research, receiving instruction in appropriate scientific techniques by the faculty, where appropriate. As the project nears its end, the student will compile the literature review, research design, and results and conclusions into a final report. This final report will serve as the foundation for a formal oral presentation of the project given to students and faculty at PNWU during the term following the student's research experience. Students are encouraged to submit project abstracts for regional and national presentations.

#### RSRCH 701, Research (2 or 6)

The purpose of this research elective rotation is to provide students the opportunity to experience research as it relates to medicine. Research topics are discussed with faculty of record with a clearly defined plan for the student to follow. Students then will search and evaluate the research literature as they formulate the details of their scientific study. After planning the research with the guidance of the research scientist or physician, the student will perform the research, receiving instruction in appropriate research methods by the faculty. As the project nears its end, the student will compile the literature review, research design, and results and conclusions into a final report. The length of this rotation can be varied to meet individual student preferences, and can be from 2-6 weeks in duration. Students are expected to commit 40 hours per week in the laboratory or office setting or conducting literature review for successful completion of this rotation.

#### SURG 701, Surgery (2 - 6)

A surgery core rotation is required. Surgery rotation(s) provide the student with adequate exposure to a variety of surgical procedures and to increase understanding of the pre- and post-operative needs of the surgical patient. The learning experience will be provided in the OR suite and at the patient's bedside. The attending surgeon will be responsible for providing instruction in a variety of different surgical techniques and for providing other pertinent information regarding the care of their particular patients. This rotation is open to all surgical specialties available at the core site.

#### SURG 702. Radiology (2)

The radiology clerkship is scheduled with a preceptor who is an expert in the field. The course is used to gain the foundation of knowledge required of osteopathic physicians who will be ordering diagnostic imaging as part of their practice. This primary care core elective will introduce students to the radiology reading room, various imaging modalities, and basic image-guided diagnostic and therapeutic procedures. The student may be given the opportunity to participate in procedures as the preceptor determines their readiness. The curriculum for this rotation is based on the nationally recognized curriculum from the

Alliance of Medical Student Educators in Radiology.

#### SURG 703, Anesthesiology (2 - 4)

Anesthesiology clinical rotation is available as a surgical subspecialty elective. The student will be assigned to a physician trainer or group of physician trainers who are practicing in their specialty. The purpose of this is to familiarize the student to various methods of anesthesia and the skills associated with this specialty. Upon completion of this rotation, the student would have improved basic skills in peripheral venous catheterization and venipuncture. The student should be exposed to various central line catheterizations, intubation, and anesthesia management, including pharmacologic agents used in anesthesia. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 704, Ophthalmology (2 - 4)

Ophthalmology is available as a subspecialty elective in the area of surgery. Students will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 705, Orthopedics (2 - 4)

Orthopedics is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 706, Otorhinolaryngology (2 - 4)

Otorhinolaryngology is available as an elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 707, Radiology (2 - 4)

Radiology is available as an elective. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 708, Urology (2 - 4)

Urology is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 709, Pathology (2 - 4)

Pathology is available as an elective in surgery. The goal of the rotation will be to study the use and limitations of clinical laboratory data for the diagnosis and treatment of disease. All divisions or combinations of the laboratory may be included. Students will observe and assist in the handling of surgical and biopsy specimens and the performance of frozen sections. They will also attend and participate in other teaching activities of the department at the discretion of the preceptor.

#### SURG 710, Trauma Surgery & Surgical Critical Care (2 - 4)

The rotation provides the student with exposure to commonly encountered cases in trauma surgery and critical care. To accomplish this, the rotation provides broad exposure to both chronic and acute problems, experience in appropriate consultation, outpatient diagnostic testing, patient education and other procedures. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 712, Surgical Elective (2 - 4)

Surgical Elective is available as an elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 713, Surgery (2)

A surgery primary care core rotation. The student will be assigned to a physician trainer or a group of trainers who are practicing in their specialty. Surgery rotation provides the student with adequate exposure to a variety of surgical procedures and to increase the understanding of the pre- and post-operative needs of the surgical patient. The learning experience will be provided in the OR suite and at the patient's bedside. The attending surgeon will be responsible for providing instruction in a variety of different surgical techniques and for providing other pertinent information regarding the care of their particular patients.

#### SURG 715, Cardio-Thoracic Surgery (2 - 4)

Cardio-Thoracic Surgery is available as a subspecialty elective rotation in surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 719, Podiatry (2 - 4)

Podiatry is available as a subspecialty elective in the area of surgery. The student will be assigned to a physician trainer or a group of physician trainers who are practicing in their specialty. This course may be repeated with different preceptors to obtain additional clinical exposure.

#### SURG 801, Surgery Sub-Internship (2 - 4)

The surgical sub-internship in surgery is meant to give the student who is interested in surgery a more in depth experience in surgery. The student will take on the responsibilities of a first year resident. In this capacity, they will see consults in the emergency room and on the floor, manage patients that have been admitted to the service, and assist in the operating room. This rotation introduces the student to general surgical principles including pre-op evaluation, intra-op decision making and post-op care. Students will deal with surgical illness, surgical critical care and non-operative care of the critically ill. Students should become "experts on the abdomen." This course may be repeated with different preceptors to obtain additional clinical exposure.



# SCHOOL OF OCCUPATIONAL THERAPY (SOT)

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## **PNWU-SOT** Mission and Vision

#### Mission

To prepare occupational therapists as leaders, scholars, and change agents who deliver occupationbased services that promote the health and well-being of rural and medically underserved communities throughout the Northwest and beyond.

#### Vision

To be a leader in preparing occupational therapy professionals who revolutionize the health of rural and medically underserved communities.

## School Philosophy, Curricular Threads, and Program Outcomes Philosophy

Our philosophy emphasizes occupation as central to the human experience. Through occupation, people engage in a process of inquiry; through inquiry, they learn, grow, self-actualize, and experience community and meaning (Cutchin, 2013; Cutchin & Dickie, 2012). Occupations are shaped by personal, social, physical, historical, and other contextual factors that may emerge and change across the life course. The relationship among people, contexts, and occupations is transactional in that each shape, and is shaped, by the other (Dickie et al., 2006). Occupational therapy is the skilled and innovative use of meaningful occupations in the intervention context to promote health and wellbeing and improve the life quality for clients, who can be persons, groups, and populations (American Occupational Therapy Association [AOTA], 2020). Effective occupational therapy interventions must be an occupation-based, socially responsive, and client-centered process that is grounded in best evidence and respect for the individual and their context.

### View on Humans and How They Learn

The PNWU School of Occupational Therapy (SOT) professional program is based on the philosophical belief that participation in meaningful occupations is necessary for humans to learn, grow, and flourish. Moreover, occupational engagement is a human right and a determinant of health and wellbeing (AOTA, 2020). Individuals, groups, communities, and populations have the right to participate in occupations that have meaning and value for their lives. Occupational engagement is transactional as the person, occupation, and context/environment co-constitute and co-influence one another. Occupations may change over the life course as individuals develop mentally, physically, and socially and take on new roles. Human learning occurs through occupation via inquiry into the dynamic transaction between a person and a task in the context of the relevant environment. Such learning occurs incrementally through the repeated practice of inquiry across the life course. Occupational therapy strives to facilitate this transaction in ways that promote occupational engagement and the health and wellbeing of the mindbody whole (AOTA, 2020).

### **Educational Philosophy**

The fundamental belief in occupational therapy education is that students are occupational beings who are actively engaged in an inclusive, client-centered, evidence-based, and occupation-focused teachinglearning process in a way that "promotes professional and clinical reasoning; critical thinking; cultural

understanding; and the integration of professional values, theories, evidence, ethics, and skills" (AOTA, 2018, p. 1). Occupational therapy education is a life-long process that begins with didactic and experiential learning in an academic setting and continues throughout one's career to "shape a practitioner's professional identity" (AOTA, 2018, p. 1).

Because health and healthcare landscapes are continually changing, future practitioners must be prepared to function within traditional biomedical, disease-focused models and institutional care settings while being equally positioned to advance the profession through carving new paths and leveraging opportunities in emerging settings. Moreover, future practice must increasingly emphasize services that promote health, prevent disease and disability, and address social and behavioral determinants of health to bring 'health' and 'care' to an increasingly diverse clientele.

The future of healthcare, therefore, requires graduates to be prepared:

- 1. To assess situations and problems holistically, carefully, and critically;
- 2. To collaborate and be in constant dialogue with clients, other practitioners, and stakeholders to imagine and shape potential solutions; and
- 3. To evaluate, reflect on, and assess outcomes and needs to modify approaches and treatments.

Understanding the transactional relationship of people and their contexts, the individual and social habits shaped through those relationships, and how individual and community problems arise from situations that adversely impact occupational performance, occupational participation and wellbeing are central to the way that students learn about occupation and occupational therapy in our curriculum.

This philosophical approach to education and practice, which underlies the PNWU SOT curricula, is the Transactional Perspective on Occupation (Cutchin & Dickie, 2013). The SOT implements a focus on this transactional perspective, especially through its central tenant of inquiry as the formative concept underlying our curriculum's educational philosophy. The basis for the Transactional Perspective is found in the philosophy of John Dewey, in particular his theories of education, habits, inquiry, growth, and community (Aldrich & Cutchin, 2013; Cutchin, 2007; Cutchin, 2013; Dickie et al., 2006). Guided by the Transactional Perspective on Occupation, the SOT curriculum aims to train students through developing capacities, habits, and skills in the areas of observation, critical and professional reasoning, creativity and imagination, collaboration, reflection, and evaluation, and thereby, complex problem solving. Those capacities are developed in the context of learning, especially social learning, about the distinct value of occupation and occupational therapy.

The educational philosophy is implemented throughout the curriculum in various ways, emphasizing the following concepts:

- situations (Dickie et al., 2006).
- constitute it (Cutchin & Dickie, 2012; Dickie et al., 2006).
- the repeated experiences of individuals in particular contexts (Cutchin, 2007).

• Transactions are the active, ever changing functional relations that integrate persons and

• Occupations are a fundamental part of the transactional relationship between people and their various contexts. Through occupation, people functionally coordinate themselves and their world to keep the transactional unit whole and operational for the benefit of the dimensions that

Problematic Situations are indeterminate situations occurring in everyday life and occupation that are the impetus for thought and action to bring them to resolution (Cutchin, 2013).

• Habits are one's predisposition to modes of response (thoughts and actions) acquired through

- Inquiry is a process that includes observing, reasoning, imagining, discussion and deliberation, experimentation, evaluation, reflection, and practice. Inquiry takes place in the context of occupation, is an individual and social process, and is directed towards resolving indeterminate, problematic situations so as to restore functional relations among persons and situations (e.g., transactions; Cutchin, 2013).
- Practice is the repeated process of engaging in inquiry to address scientific questions, as well as problems of everyday life. As people practice, they draw on prior learning and experiences and incrementally add to and refine the tools in their intellectual, emotional, and physical toolbox. Practice thus provides personal and collective growth to better resolve future problematic situations.

The SOT situates the programs' core content and students' learning within the frame of the Transactional Perspective on Occupation, and emphasizes occupation as a fundamental part of the dynamic relationship between people and their various contexts, which include the social, cultural, historical, virtual, etc. The SOT implements strategies of inquiry throughout the curriculum, including a focus on the ways in which (1) people engage in occupation and employ inquiry in occupational processes, (2) therapists work with clients to execute inquiry in the therapeutic process, and (3) therapists work with communities and care institutions to employ inquiry for broader impacts on occupation and population health. These strategies of inquiry are structured into the SOT pedagogy through readings, discussions, assignments, exercises, simulations, and projects. Formative assessments also engage students to receive feedback and reflect on dimensions of inquiry. An additional, longer-term element of the SOT educational philosophy is the growth of students in the development of such skills of inquiry, and in the development of habits of inquiry (i.e., life-long learning habits) in students. This growth leads them to continue to inquire via practice and develop as occupational therapists who are imaginative and successful in addressing occupational needs at the individual, community, and societal levels of engagement.

This philosophy is fully in tune with the fundamental values and belief of occupational therapy education (AOTA, 2018) and an innovative university environment that cultivates the personal and professional growth of its students and transforms them into expert clinicians, leaders, and change agents. The curriculum includes multiple opportunities for students to apply what is learned in the classroom to the real world through interprofessional educational activities (AOTA, 2018) and civic engagement in ways that support local, regional, and global causes. Those opportunities enrich students; foster the habits of thought and action needed to engage in socially responsive practice; promote an inclusive culture of humility and sensitivity; and strengthen the bonds between the students, the SOT, and the communities in which we live and work. Our graduates enter the field with a unique occupational therapy and occupational science lens and with innovative skills that will contribute to addressing society's needs.

### PNWU-SOT MSOT Curricular Threads and Program Outcomes

Though ACOTE determines the basic content to be covered in professional programs, the PNWU curriculum has been developed based on our mission, philosophy, the Occupational Therapy Practice Framework: Domain and Process (4th ed.; AOTA, 2020), and the pillars of the AOTA 2025 Vision. The overarching Program goals are presented below, followed by six curricular threads, which guide and organize the curriculum.

#### The PNWU SOT Prepares Graduates Who:

1. Integrate knowledge of occupation and the biological, physical, and behavioral sciences necessary

for entry-level occupational therapy practice.

- 2. Apply the concepts of human action to the therapeutic process, including the evaluation of action and the implementation of interventions that target the capacity for action.
- 3. Synthesize best evidence and apply the principles of inquiry to inform clinical decision making.
- 4. Provide socially responsive, evidence-based, and occupation-based services to rural and medically underserved areas (MUAs).
- standards.
- communities we serve.

#### Experts in Occupation

Occupation is the defining concept of the profession and differentiates occupational therapy from other health professions. Occupations are the everyday, often taken-for-granted, activities in which one engages (i.e., what people 'do' with their time and energy). Occupations reflect and support one's identity, sense of self and one's connection to others and contexts, help individuals meet their basic needs, and help people flourish and live life to the fullest. Occupations are socially constructed, can be age normative, and are often patterned in everyday habits and routines. Occupations give one's life personal meaning and value and are central to a person's health, wellbeing, and life satisfaction. The PNWU MSOT curriculum is first and foremost designed to foster an in-depth understanding of occupation. Occupation is viewed as fundamental to human learning, development, and health, and as such, worthy of exploration. Building on a strong foundation in occupational science, students learn how to apply occupation therapeutically, as the means and/or ends of treatment with individuals, groups, communities, and populations. Key courses include Human Capacities I and II (OTH 500 and OTH 525); Introduction to Occupation and Occupational Therapy (OTH 510); Psychosocial Processes Across the Life Course (OTH 515); Environment, Technology, and Occupation (OTH 535); Occupation-based Interventions I, II, and III (OTH 530, OTH 550, and OTH 605); and Occupation-based Health Promotion and Chronic Condition Management (OTH 555).

#### **General Student Learning Outcomes:**

- 1. Comprehend the complex, transactional, and socially constructed nature of occupations as they contribute to survival, health, and wellbeing across the life course.
- 2. Analyze occupations for the purpose of understanding the transactions between person, environment, and occupation, and the factors that promote or disrupt occupation for individuals, groups, communities, or populations.
- 3. Analyze a range of contexts and apply knowledge of persons, environments, and occupations, in ways that support performance and participation in occupation.
- 4. Synthesize information from the client's occupational profile and apply insights for the purpose of client-centered intervention planning.
- and evaluate occupation-based interventions.

#### **Human Action**

This theme addresses humans' capacity for action in the context of participating in and performing meaningful daily life activities throughout one's life. The ability to do what people want to do, need to do, and/or are expected to do is essential for meeting occupational needs, promoting self-actualization, and achieving health and wellbeing. Diseases, injuries, other health conditions, and environmental changes can lead to changes in one's capacity to participate in and perform occupations at their desired level of

5. Practice in a socially responsive manner that is consistent with legal and ethical practice

6. Demonstrate exemplary professionalism and add value to the interprofessional team. 7. Lead and advocate to change policies, contexts, and systems that impact the profession and

5. Demonstrate defensible clinical judgment and an ability to formulate, safely implement, adapt,

performance and satisfaction. These changes in the capacity for action can lead to long-term health problems and disability. To gain a better understanding of this phenomenon, human action is explored from anatomical, physiological, kinesiological, and behavioral perspectives. In addition, sociocultural and physical environmental contexts are examined to gain a better understanding of what people do. how they do it, and why. The idea of human action is reinforced throughout the curriculum. Courses that address this theme focus on understanding the underlying structures and system functions needed to support successful performance of meaningful activities. Courses also address the dynamic interrelationships between an individual's capacities for action, the demands of their occupations, and the constraints of their physical and sociocultural environments. This understanding is (1) leveraged in a way to enhance clients' capacities for action to meet, overcome, adapt to, and recover from the demands of their occupations; and (2) the foundation of knowing that informs a client-centered, individualized, and occupation-based therapeutic process. Key courses include Human Capacities I and II (OTH 500 and OTH 525); Introduction to Occupation and Occupational Therapy (OTH 510); Occupation-based Interventions I, II, and III (OTH 530, OTH 550, and OTH 605); and Occupation-based Health Promotion and Chronic Condition Management (OTH 555).

#### **General Student Learning Outcomes:**

- 1. Comprehend how the transaction between physical, mental, and socioemotional structures, functions, and processes shapes the capacity for human action.
- 2. Apply knowledge of persons, environments, and occupations to foster human capacity for action across the life course.
- 3. Analyze changes in physical, mental, and socioemotional structures, functions, and processes that occur over the life course or due to illness or disability and their impact on occupational participation.
- 4. Evaluate the impact of changes in the capacity for action on occupation, identity, social connection, meaning-making, health, and wellbeing.

#### Inquiry

This theme addresses inquiry as necessary to the advancement of the profession and as situated in the service of the communities in which we practice and live. The curriculum is designed to foster the practices of clinical and scientific inquiry, with the end goal of expanding knowledge of occupation and its translation to interventions that improve the lives of individuals, groups, communities, and populations. Inquiry is an iterative process of exploration, assessment, experimental application, and re-appraisal. Both clinical and scientific inquiry are fostered through understanding the scientific method, diverse research methodologies and ways of knowing, observations, and use of best evidence. In addition, inquiry is addressed as both an individual and social process that inherently involves persons and communities in addressing problems of health, wellness, and participation. The principles of inquiry are introduced and applied to both research and therapeutic practice. Although the concept of inquiry is reinforced throughout the curriculum, the Foundations of Inquiry I, II, and III (OTH 505, OTH 540, and OTH 615) courses provide students with more in-depth opportunities to synthesize and enact principles of inquiry.

#### **General Student Learning Outcomes:**

- 1. Comprehend the process of inquiry in research, clinic practice, and everyday occupation.
- 2. Apply theories and evidence to inform clinical decision making.
- 3. Apply the principles of inquiry to research and clinical practice.
- 4. Comprehend the importance of developing habits of inquiry (lifelong learning, curiosity, practice) and the need to be a clinician scholar and contribute to building the professional evidence base.

### Health Promotion in Rural and Medically Underserved Communities

This theme addresses the role of occupational therapy practitioners in health promotion and disease/ injury prevention, especially among rural and medically underserved populations. Coursework related to this theme addresses the need for occupational therapy professionals (1) to understand the contexts and conditions that shape health in rural and medically underserved communities; (2) to understand the concepts of health disparities, social determinants of health, public and population health, and health promotion and disease prevention; and (3) to be equipped to develop programs and interventions that address social determinants of health and wellbeing and/or facilitate occupational performance and participation in ways that promote health and prevent disease. Health promotion in rural and medically underserved communities is reinforced throughout the curriculum, especially through the Introduction to Occupation and Occupational Therapy (OTH 510); Professional Seminar (OTH 520); Environment, Technology, and Occupation (OTH 535); Occupation-based Health Promotion and Chronic Condition Management (OTH 555); OT Management and Entrepreneurship (OTH 610) courses; and the nontraditional Level 1C Fieldwork experiences (OTH 625).

### General Student Learning Outcomes:

- communities.
- prevention needs in rural and medically underserved communities.

#### **Socially Responsive Practice**

This theme addresses the importance of practicing in a manner that is equitable, inclusive, and upholds the dignity and rights of all individuals. The concepts of ethics, justice, and advocacy inform the PNWU SOT curriculum. Ethics refers to the values, motivation, and principles that shape behavior and practices. Justice refers to safeguarding human rights and equitable access to occupational participation, regardless of socioeconomic, demographic, or other factors. Advocacy refers to actions taken to defend, support, or promote the rights or positions of others and socially responsive practice. Through an occupational justice lens, coursework, interprofessional education (IPE) experiences, and hands-on experiences serve (1) to develop students' habits of thought and action relative to ethics, justice, and advocacy and, (2) to grow students' confidence in applying those skills in a range of situations. Although ethics, justice, and advocacy are emphasized throughout the curriculum, the Introduction to Occupation and Occupational Therapy (OTH 510), Psychosocial Processes Across the Life Course (OTH 515), Professional Seminar (OTH 520), Occupation-Based Health Promotion and Chronic Condition Management (OTH 555), and Transition to Practice (OTH 620) courses provide students with more in-depth opportunities to understand and enact principles of ethics, justice, and advocacy.

#### **General Student Learning Outcomes:**

- communities, and populations, especially in rural and MUAs.

1. Comprehend the historical, geographical, political, socioeconomic, demographic, and policy related factors that shape the health of rural and medically underserved communities.

2. Apply evidence-based models of rural healthcare delivery, health promotion, and disease prevention to address occupational needs in rural and medically underserved communities.

3. Analyze the contexts and conditions that shape health in rural and medically underserved

4. Evaluate potential applications of occupational therapy to address health promotion and disease

1. Comprehend the role of ethics and advocacy in promoting socially just and responsive practice. 2. Analyze the equitable distribution of resources and access to occupation for individuals, groups,

3. Apply the principles of ethical and just practice as outlined by the AOTA Professional Code of Ethics and Washington State Code of Ethics and Standards of Professional Conduct to research activities, practice situations, and interactions with peers and community members.

4. Apply the principles of advocacy for the profession and the communities we serve.

#### Leadership, Innovation, and Collaboration

This theme addresses the role of occupational therapy practitioners as leaders and change agents, their role on interprofessional teams, and their dedication to collaborative and client-centered care. Coursework is focused on IPE, leadership skills, and skills needed to foster therapeutic use of self and collaborative client-provider interactions. Didactic coursework is augmented with community-based, experiential, and interprofessional learning opportunities in community and nontraditional settings and prepares students to (1) excel in interprofessional teams, (2) take on leadership roles, (3) engage in therapeutic relationships, (4) promote the distinct value of occupation and occupational therapy, (5) become good stewards of resources, and (6) advocate for political, social, and systems change. Leadership, innovation, and collaboration in practice is reinforced throughout the curriculum, especially through the Introduction to Occupation and Occupational Therapy (OTH 510), Professional Seminar (OTH 520), and Transition to Practice (OTH 620) courses and the Interprofessional Education Passport activities.

#### **General Student Learning Outcomes:**

- 1. Comprehend different leadership and advocacy opportunities within the profession and modes of leadership and advocacy that lead to professional advancement and systems change.
- 2. Apply principles of leadership to optimally meet professional, societal, community, and individual needs.
- 3. Communicate and act in a professional, compassionate, and culturally sensitive manner in all encounters with clients, other professionals, and the general public.
- 4. Articulate the distinct value of occupation to clients, healthcare professionals, and the general public.

# **SOT Admissions**

### Holistic Admission Statement

Admission to the PNWU School of Occupational Therapy (SOT) Master of Science in Occupational Therapy program (MSOT) is a competitive process. However, we recognize that students come from different backgrounds, have different life experiences, and have had different access to educational and other developmental opportunities. We welcome the benefits that a diverse student body brings to the SOT, our campus, and the occupational therapy profession.

Use of a holistic and inclusive approach to admissions allows the Admissions Committee, composed of faculty from the SOT, to consider not only grade point average, but also student information provided through personal statements, supplemental essays, and your curriculum vitae/resume. The admissions process at the SOT, therefore, includes a holistic evaluation of all application materials unique to each potential student.

The PNWU School of Occupational Therapy takes the following actions to create an inclusive and equitable admissions process:

No GRE or other standardized tests

- No minimum undergraduate GPA requirements
- No OT shadowing hours
- The option for onsite or virtual interviews
- Vision and mission-driven selection criteria

In addition, The PNWU School of Occupational Therapy does not require prescribed prerequisite courses. Instead, applicants will be asked to submit a personal statement and three supplemental essays explaining how their life experiences, prior coursework, and/or experiences shadowing with an occupational therapist have prepared them to be successful in the MSOT program.

### **Basic Admission Requirements**

Applicants to the School of Occupational Therapy who are pursuing a Master of Science in Occupational Therapy must:

- 1. Attain a minimum age of 18 years at the time of matriculation into PNWU.
- 2. Be a US Citizen, US permanent resident status, or DACA status.
- competitive.
- (OTCAS) which will include:
  - As part of the OTCAS application process, students must submit:
  - 1. A resume noting academic training and work experience and achievements
  - 2. Official **transcripts** of all academic coursework
    - from the service.
  - writers who know them well so they can comment on the following:
    - a. The applicant's ability to be academically successful.
    - b. The applicant's professional behaviors such as timeliness, communication, accountability, teamwork, work performance, and/or service commitment
    - c. The applicant's fit with the profession of occupational therapy.
      - 1. One letter from a current or previous instructor/professor.
      - 2. One letter from someone who has worked with the applicant in a supervisory role (either paid or voluntary work/service).
      - second supervisor.

3. Have earned a baccalaureate degree from a regionally accredited college or university or be eligible to receive a bachelor's degree from an accredited college or university by the end of spring semester/quarter prior to admission to the program. There is no minimum GPA requirement for undergraduate coursework, however, a 3.0 GPA or higher is highly recommended to be

4. Complete a primary application through Occupational Therapy Centralized Application Service

a. Applicants should send all official transcripts directly to OTCAS (not to Pacific Northwest University of Health Sciences). We strongly encourage you to submit all transcripts in advance of the application deadline because OTCAS requires several weeks to verify transcripts. Coursework taken at foreign institutions must be evaluated for US equivalence by an evaluation service and an official copy must be sent directly

3. Three letters of reference submitted through OTCAS. Applicants should choose letter

3. One letter from an occupational therapist. However, if an applicant did not have an opportunity to shadow an occupational therapist due to the COVID-19 pandemic, the applicant may submit a letter from either a second instructor/professor or a

4. Three **Supplemental Essays:** The prompts for the supplemental essays will be available in OTCAS once the annual admissions cycle opens each year in July. To find out more about

the supplemental essays and applying to PNWU, we encourage students to attend a free, online information session.

### Additional Admissions Criteria

- 1. The SOT does not require drug testing as part of the application process. However, clinical education opportunities may require drug testing after acceptance to the program. In those instances, the student is responsible for paying for, and obtaining any additional drug or background tests.
- 2. The School of Occupational Therapy does not defer admissions, but it encourages students to apply again in the following year.
- 3. Acceptance is conditional until all required documentation is received and completed to PNWU's satisfaction. If accepted to the MSOT program, applicants must complete all program entry requirements as outlined in the applicant's offer letter from the School of Occupational Therapy prior to enrollment in the MSOT program.

Other requirements that must be met prior to matriculation (described below):

- Pass a criminal background check
- Obtain CPR certification •
- Meet medical and immunization requirements
- Attest they meet minimum technical standards
- Meet minimum laptop requirements as specified in the student catalog •
- All final, official transcripts from every college or university attended must be on file prior to matriculation

### Advanced Placement

The PNWU School of Occupational Therapy does not grant advanced placement credit.

### **Selection Process**

The School of Occupational Therapy admissions committee carefully evaluates each applicant's application to determine eligibility and suitability to the program. After the initial assessment, selected applicants are invited for a formal interview. After the interview, the Admission Committee reviews the applicant files and makes recommendations to the program director. Applicants are notified as soon as final admission decisions are made. In cases where an applicant cannot travel to campus, arrangements for virtual interview and virtual tour will be made on a case-by-case basis.

### Notification

Final admission decisions are made by the program. Applicants are notified via email and the Self-Service portal is updated as soon as a final admission decision has been made.

Note: Intentional misrepresentation or omission of information relative to scholastic records, test records, background reports, etc. will subject the applicant to rescinded admission or a student to dismissal. The University reserves the right to deny admission to any applicant for any reason in deems sufficient.

# **SOT** Academics

### SOT Academic Calendar and Timeline

August 1, 2023	Complete matriculation document requirements (CBC, immunization, health care coverage, online training, CITI)
August 24-25, 2023	OT Orientation
August 28, 2023	OT Fall Term Begins - Class of 2025 Tuition Due
September 4, 2023	Labor Day, No Classes
September 15, 2023	Last day to withdraw with a partial refund
October 16-20, 2023	Mid-term week for Fall Term
November 1, 2023	Annual flue shot, details about times and loca- tions will be posted when available
November 22-24, 2023	Thanksgiving Break, No Classes
December 11-15, 2023	Finals Week for Fall Term
December 15, 2023	Fall Term Ends
December 22, 2023	Fall Term Grades Due
January 8, 2024	OT Spring Term Begins Tuition Due
January 15, 2024	Martin Luther King Day, No Classes
January 26, 2024	Last day to withdraw with a partial refund
February 19, 2024	Presidents' Day, No Classes
February 26 - March 1, 2024	Mid-term Week for Spring Term
March 11-15, 2024	Spring Recess
April 29 - May 3, 2024	Finals Week for Spring Term
May 3, 2024	Spring Term Ends
May 10, 2024	Spring Term Grades Due
May 20, 2024	OT Summer Term Begins
May 27, 2024	Memorial Day, No Classes
June 7, 2024	Last day to withdraw with a partial refund
June 17-21, 2024	Mid-term Week for Summer Term
June 19, 2024	Juneteenth, No Classes
July 4, 2024	Independence Day, No Classes
July 22-26, 2024	Finals Week for Summer Term

July 26, 2024	Summer Term Ends
August 2, 2024	Summer Term Grades Due

### Grading and Evaluation

At the beginning of each term, the instructor is to inform students (in writing via the course syllabus) of the criteria used in grading for the class, including the relative importance of prepared papers or other assignments, quizzes and examinations, class participation, and attendance. Where student performance in other practical and structured activities is relevant in evaluating professional competency, criteria used in such evaluations must be stated.

Written materials must be graded and returned to the appropriate party (e.g., assessment department or directly to the students) within 10 business days, together with comments and an explanation of grading criteria. Instructors are expected to evaluate student work according to sound academic standards. Equal expectations should be required of all students in a course and grades must be assigned without departing from announced procedures. Final grades are determined by the combined results of assignments, examinations, participation, and mastery of the subject as evidenced by the ability to communicate clearly in both oral and written form, according to the weighting of specific grades as listed in the syllabus.

PNWU adheres to the grade posting practices recommended under the <u>Family Education Rights Privacy</u> <u>Act</u> (FERPA). Grades are not posted in a public manner either by student name, social security number, or student identification number. Faculty members, or their designee, will post grades in the secured access online portal system. Students may access their final grades one week (7 days) after the course end date. FERPA permits the posting of grades in a public manner only if the student is assigned a unique identifier known only to the student and the faculty member.

The SOT grading scale below is applied to all academic coursework, regardless of degree tract. Although students may earn less than a B- on a particular exam or assignment, students are required to pass all courses with a grade of B- or greater, as per the SOT graduation policy.

Faculty appreciate how frustrating it can be for students to receive a final grade that is a fraction of a percentage shy of a higher letter grade; however, requests to consider raising a grade on the sole basis that the student is very close to the cutoff will not be successful and are considered conduct unbecoming of students enrolled in the MSOT program and in conflict with the Student Code of Conduct.

Regarding grading and grades, faculty and students have an obligation to abide by the <u>PNWU Student</u> <u>Honor Code</u> and the <u>AOTA Code of Ethics</u>. It is the duty of each faculty member and student to report any Code of Conduct violation; failure to do so is itself a violation of the Code.

Grade	Description	Grade Points	Numeric Grade
A+	Excellent	4.0	97-100%
А		3.9	93-96.99%
A-	Good	3.7	90-92.99%

B+		3.3	87-89.99%
В	Average	3.0	83-86.99%
B-		2.7	80-82.99%
C+	Below Average	2.3	77-79.99%
С		2.0	73-76.99%
C-	Poor	1.7	70-72.99%
D+		1.3	67-69.99%
D	Very Poor	1.0	63-66.99%
D-		0.7	60-62.99%
F	Failing	0.0	0-59.99%

#### **Incomplete Grades**

If a student, due to illness or other unusual or compelling reason, is unable to complete sufficient work in a course to be granted a grade, faculty may consider granting an incomplete grade ("I") only with the permission of the SOT Student Progress Committee (SPC) and PD. An incomplete may not be given when a student is performing unsatisfactorily or when a passing grade cannot be achieved after all the required work is completed.

Normally it is expected that the student will make up an "I" grade during the semester that follows the course in question. Course sequence and prerequisites determine whether a student can progress to the next semester with an "I." If the student may proceed to the following semester with the "I," the incomplete coursework must be made up by the end of the following semester or the "I" will change to a failing grade. If the student cannot begin the next semester without mastering content missed from the prior semester, the student will need to make up missed content prior to the beginning of the next semester. The SPC will review all cases of incompletes and render recommendations.

The symbol "I" (Incomplete) indicates that a portion of required coursework has not been completed and evaluated in the prescribed time period due to unforeseen, but fully justified, reasons and that there is still a possibility of earning credit. In order to be eligible for an "I" grade, the student must have completed at least two-thirds of the required coursework with a B-.

It is the responsibility of the student to bring pertinent information to the attention of the instructor before the end of the semester and to determine from the instructor the remaining course requirements that must be satisfied to remove the incomplete. A final grade is assigned when the work agreed upon has been completed and evaluated.

Students who are unable to make up an "I" prior to the start of the subsequent semester must request in writing permission from the Student Progress Committee in order to progress to the next semester of the program. The student may also be given the option of withdrawing from the program and resuming studies when the course is offered at a later date. However, the student will not be allowed to start Level II Fieldwork until all didactic course work is successfully completed.

### Academic Warning, Probation, Remediation, and Dismissal

To remain in good academic standing, students are required to:

- A. Achieve a grade of 70% or greater on all course assignments.
- B. Pass exams with a score of 80% or greater.
- C. Earn > proficient performance/meets standards score in Level I Academic Fieldwork Education experiences.
- D. Achieve a cumulative midterm grade of B- or greater, or achieve a passing score at midterm for Level II Academic Fieldwork Education experiences, and
- E. Pass all courses with a grade of B- or greater.

### Academic Remediation

- 1. To ensure successful completion of coursework, students are offered content remediation throughout each semester. If a student achieves a grade of < 70% on an assignment OR a score of < 80% on an exam, the student must engage in remediation. The nature of the remediation will be determined by the instructor and based on the content needing to be remediated.
- 2. The student re-takes the assignment/assessment.
  - a. If the student passes the assignment/assessment, the student will receive the lowest passing score (70% for assignment, 80% for assessment) regardless of how high the student scores on the retake. Example: 60 (original) + 90 (retake) = 150/2 = 75. Student receives a 70% for an assignment or 80% for an assessment.
  - b. If the student does not pass the retake of the assignment/assessment, the student receives the highest of the two failing grades. Example: 60 (original), 65% (retake) = Student receives a 65% (grade recorded in gradebook)

### Academic Alert

- 1. If either criteria A, B, or C above are not met, the student will receive an Academic Alert.
  - a. The alert will be in the form of an email generated from the course instructor, which will be sent to the student, the student's advisor (if not the course instructor), and the PD.
  - b. The instructor will notify the student of the need for and terms of remediation. The Alert will be entered into Progress IQ for the student to review.
  - c. Remediation must occur within two weeks (14 calendar days) following the issuance of the alert. Students will have one opportunity to remediate content.

### **Academic Warning**

- 1. Student academic progress and academic standing are also formally assessed at the mid-point of every semester (fall, spring, and summer) using the Student Progress and Academic Standing form (Appendix C), which is completed by the course instructor.
- 2. Students whose cumulative midterm grade is at the level of C+ or below in any course, or who achieve a failing score at midterm for Level II Academic Fieldwork Education experiences at the midterm assessment are given an Academic Warning.
- 3. An academic warning is serious. It signals to the student they are at risk, despite prior remediation attempts, of failing a course.
  - a. The Academic Warning is generated by the instructor and provided to the PD and the student's advisor (if different from the course instructor).
  - b. The PD forwards the notification to Enrollment Services who will issue the official notice to the student and maintain a copy of the Academic Warning in the student's academic

record.

- a remediation plan.

  - and to develop strategies to address the causes.
  - pass the course.
- 4. Students who are on warning status:
  - mandatory class activities), or organizations,
  - b. Are not eligible for PNWU sanctioned travel, and

  - performance.

### Academic Probation and Student Progress Committee Review

The SOT Student Progress Committee (SPC) reviews the cases of students:

- 1. Whose cumulative GPA falls below 3.0. or
- for Level II Academic Fieldwork Education experiences.

Cumulative GPAs and final course grades are reported through Enrollment Services at the end of each semester. If a student fails to meet either of the above criteria, the student will be notified in writing that their case is being sent to the SOT Student Progress Committee for review. The notification will be generated by the PD and the notification will also be sent to the student's academic advisor and the chair of the Student Progress Committee.

As part of the Student Progress Committee review process, the student may submit to the committee a written explanation of any extenuating circumstances, such as injury, illness, death of a relative, or other special circumstance that they believe impacted their academic progress. The appeal must explain why the student failed to make satisfactory progress and what has changed in their situation that will allow them to make satisfactory progress next term.

If the committee determines the student should be able to remediate and meet the academic progress standards by the end of the next term, the student will be placed on academic probation. The PD will notify Enrollment Services of the decision. Enrollment Services will issue the official notification to the student and retain a copy of the notification in the student's academic record.

Students may only be placed on probation once during their course of study. While on probation, the student may proceed to register for the following semester of coursework and may receive financial aid.

- 1. Students who are on probation status:
  - mandatory class activities), or organizations,
  - b. Are not eligible for PNWU sanctioned travel, and
  - c. May not run for or hold the position of executive, class, or club officer.

c. Within one week (seven calendar days) of the issuance of the warning the student, instructor of record for the course in question, and academic advisor must meet to develop

1. The purpose of the plan is to identify causes of unsatisfactory academic performance

2. The goal of the remediation plan is to ensure the student will be able to successfully

a. May not participate in PNWU-sponsored extracurricular events, research (outside of

c. May not run for or hold the position of executive, class, or club officer.

d. Additional restrictions from activities may be included if deemed detrimental to academic

2. Who did not achieve a minimum final grade of B- for any MSOT course or receive a 'pass' grade

a. May not participate in PNWU-sponsored extracurricular events, research (outside of

d. Additional restrictions from activities may be included if deemed detrimental to academic

performance.

2. Students on academic probation (during the didactic portion of the curriculum) are not eligible to participate in FW II.

In cases of Academic Probation, remediation will be determined by the SOT Student Progress Committee. Remediation may involve repeating specified course content to raise the course final grade to a B- or better or repeating the entire course.

- 1. Repeating an MSOT course is permitted only once during a student's tenure in their respective program. In most cases, repeating a course will increase the time necessary to complete degree requirements. As such, course repetition will only be offered as a remediation option when the remaining degree requirements can be completed within the stated time to completion.
- 2. All courses in which the student enrolled and attempted will appear on their transcript. For courses that are repeated, only the highest grade will be used in the calculation of the cumulative GPA.
- 3. If the student fails to adhere to the remediation plan, they will be dismissed from the program.

#### Dismissal

If the Student Progress Committee determines that the student will not be able to meet the program's academic progress standards, a recommendation is made to the PD for dismissal.

- 1. If the student does not believe due process was properly followed, the student may appeal by submitting a detailed letter to the Provost within five business days after receiving the dismissal notice.
  - a. The Provost's decision regarding appeal is final.
  - b. Students are notified by certified letter and secure email of all decisions.
- 2. Probation, dismissal and any other decisions of the Student Progress Committee will be placed in the student's file.

### Master of Science in Occupational Therapy Degree Requirements

The curriculum of the Master of Science in Occupational Therapy program progressively builds upon previous courses. The student must complete certain courses in order or progression to comprehend the foundation on which the curriculum builds. Academic progress requires the student complete each academic year in the progression offered.

Course	Course #	Credits
First-Year Courses		
Human Capacities I	OTH 500	6.0
Foundations of Inquiry I	OTH 505	4.0
Introduction to Occupation and Occupational Therapy	OTH 510	3.0
Psychosocial Processes Across the Life Course	OTH 515	3.0
Professional Seminar	OTH 520	1.0
Human Capacities II	OTH 525	3.0
Occupation-based Interventions I: Infants, Children, and Adolescents	OTH 530	6.0

Environment, Technology, and Occupation	OTH 535	3.0
Foundations of Inquiry II	OTH 540	3.0
Level IA Fieldwork: Infants, Children, and Adolescents	OTH 545	1.0
Occupation-based Interventions II: Adults	OTH 550	6.0
Occupation-based Health Promotion and Chronic Condition Management	OTH 555	3.0
Level IB Fieldwork: Adults and Older Adults	OTH 560	1.0
Occupation-based Interventions III: Older Adults	OTH 605	6.0
Total Fi	irst-Year Credits	43.0
Second-Year Courses		
Occupation-based Interventions III: Older Adults	OTH 605	6.0
Management and Entrepreneurship	OTH 610	4.0
Foundations of Inquiry III	OTH 615	3.0
Transition to Practice	OTH 620	2.0
Level IC Fieldwork: Non-traditional	OTH 625	1.0
Level ID Fieldwork: Mental Health	OTH 630	1.0
Level II Fieldwork A	OTH 635	6.0
Level II Fieldwork B	OTH 640	6.0
Total Seco	ond-Year Credits	29.0
Tota	l Degree Credits	72.0

### **Commencement and Degree Completion**

The commencement ceremony for entry-level MSOT students will be held in May of the second year of the program. MSOT students will be allowed to participate in the commencement ceremony. However, students must still complete all degree requirements (including successful completion of Level II Fieldwork A and B) prior to earning their MSOT degree. Participation in the commencement ceremony does not guarantee the student will be granted the MSOT degree.

#### **Time for Degree Completion**

An entry-level MSOT candidate has four calendar years starting with the date of initial registration to complete all degree requirements. Most MSOT students will complete the program by the end of second summer session (at the end of academic Year 2), two calendar years after beginning the program. During the first spring session of academic Year 2, students must submit an online application for Candidacy for Graduation. Students who complete all degree requirements by the end of summer session in the second year will graduate in mid-August. Upon graduation, students are eligible to sit for the National Board for Certification in Occupational Therapy (NBCOT) exam. Additional extensions will be considered on a case-by-case basis.

#### **Academic Standing**

Each student admitted to the MSOT program must maintain Good Academic Standing. Good Academic Standing is defined as having a Cumulative GPA of 3.0 or above.

Calculation of Cumulative GPA is as follows:

- 1. Only courses taken at PNWU in the MSOT curriculum are used to compute a student's Cumulative GPA.
- 2. Courses graded with Pass/Fail will not be used in computing GPA.
- 3. All grades for courses attempted in the MSOT program will be used in computing the Cumulative GPA for the purposes of determining academic standing.

#### **Program Progression**

The academic performance requirements for continuation through the program include both a cumulative grade point average and an individual course grade standard.

- 1. Students must maintain a cumulative GPA of 3.0 or above.
- 2. Students must also earn a minimum of B- in all required occupational therapy courses.
- 3. Two grades of C+ or below will result in automatic dismissal from the program.
- 4. One grade of F will result in the automatic dismissal from the program.

#### **Degree Completion Requirements**

The MSOT curriculum progressively builds upon previous courses. The student must complete certain courses to progress in order to comprehend the foundation on which the curriculum builds. Academic progress requires that the student complete each academic year in the progression offered. In cases where the student is eligible to repeat a course, the student may not proceed with any course that relies on mastery of the course material that the student is repeating. In most cases, this means the student must transition to a part-time track and complete the degree requirements along an individualized plan of study. For the student to be able to be on a part time track, they must still be able to complete degree requirements within 200% of the standard program timeline.

It is the responsibility of each student to know their status academically and professionally, to meet university and class deadlines throughout their course of study, and to satisfy the following requirements for the degree:

- 1. Complete all academic requirements within 200% percent of the standard program length, except where an exception is required by law.
- 2. Maintain a minimum cumulative grade point average of 3.0.
- 3. MSOT only: Pass all Level I Fieldwork requirements and receive a passing criterion score on the AOTA Fieldwork Performance Evaluation for the Occupational Therapist in both 12-week Level II Fieldwork experiences.
- 4. Meet professional behavioral standards.
- 5. Meet minimum technical standards.
- 6. Receive approval from the Student Progress Committee and the Program Director.
- 7. Submit a graduation application.
- 8. Attend and complete required exit sessions as determined by PNWU (e.g., loan counseling, etc.).
- 9. Fulfill catalog requirements in effect at the time of the student's official matriculation to PNWU.
- 10. Clear all financial obligations to the university before graduation.

#### **Requirements for Practice**

Upon graduating from the MSOT program, students are eligible to sit for the <u>National Board for</u> <u>Certification in Occupational Therapy</u> (NBCOT) exam. The student is responsible for obtaining and paying for the NBCOT exam. Upon passing the NBCOT exam, the individual will be an Occupational Therapist, Registered (OTR). In addition, all states require licensure to practice. State licenses are usually based on the results of the NBCOT Certification Examination. At this time, the School of Occupational Therapy has determined the MSOT program curricula, as defined in 34 CFR §668.43(a)(5)(v), meets the State educational requirements for licensure in all US states. Some states may require additional information, such as academic transcripts and a criminal background check. The PNWU SOT strongly encourages students to determine any additional requirements for licensure in the state in which they seek to be licensed. Note that a felony conviction may affect a graduate's ability to sit for the NBCOT certification examination or attain state licensure.

# **SOT Course Information**

#### Fall Semester, Year 1

#### OTH 500 Human Capacities I (w/lab) (6)

This course utilizes a top-down and bottom-up approach to address the structures, functions, and processes of the human body that support participation in and performance of various occupations. Student learning begins with an analysis of movement and documentation of meaningful activities and occupations using professional terminology from the Occupational Therapy Practice Framework: Domain <u>& Process (4th ed.)</u>. Analysis of activity and occupation is followed by an examination of the functional movement patterns that underlie performance. Students continue by exploring the anatomical structures and functions of the musculoskeletal, peripheral nervous, integumentary, fascial, cardiopulmonary, and digestive systems that support occupation across the life course. Students also apply goniometry for the assessment of joint flexibility and apply manual muscle testing for assessment of isometric contraction. Knowledge generated through occupational analysis is then generalized to related occupations in a stepwise approach that gradually expands students' understanding of the transaction between client factors, activity demands, and contexts. Students learn though a combination of lectures and discussion, readings, cased-based scenarios, small group activities, laboratory activities, and patient simulations. Formative and summative assessments are used to assess skills in occupational analysis, movement assessment, goniometry, manual muscle testing, knowledge of body structures and functions, and mastery of related course content. The course includes a lab. (6 credit hours: 3 in-class didactic, 3 handson skills lab)

#### OTH 505 Foundations of Inquiry I (3)

This course exposes students to the concept of the clinician-scholar and the process of inquiry in science and practice. Topics covered include principles of evidence-based practice, the scientific method, the structure and development of scientific literature, where and how to identify sources of evidence and how to critically evaluate sources of evidence. The course also introduces students to different qualitative and quantitative methodologies and research designs. Students learn through a combination of lectures and discussion, reflections, and small group activities. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

#### OTH 510 Introduction to Occupation and Occupational Therapy (4)

This course provides an overview of the domain and process of occupational therapy practice as well as the history and philosophy of the profession and introduces students to the concept of occupation and occupational science. Through use of the official documents of the American Occupational Therapy Association, including the Occupational Therapy Practice Framework: Domain and Process (4th ed.), the Occupational Therapy Code of Ethics, and other evidence-based sources, students are introduced to practice definitions, the legal, ethical, fiscal, and regulatory factors that shape and guide contemporary practice, requirements for credentialing and licensure, responsibilities for supervision of occupational therapy assistants and non-occupational therapy personnel, health policy, and payment and reimbursement systems. Theories, models, and frames of reference that support occupational therapy research and practice are also compared and applied to scenarios. This course includes a mandatory client-safety module covering universal safety precautions and personal protective equipment. Students also expand their understanding of occupational sciences through a semester-long exploration of an occupation common within rural communities. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn though a combination of lectures and discussion, readings, case-based scenarios, small group activities, and interactions with community members. OTH 510 is a designated writing course. Students will practice and receive feedback on scholarly writing and American Psychological Association (APA) in the context of class assignments. Formative and summative assessments are used to assess mastery of course content. (4 credit hours)

#### OTH 515 Psychosocial Processes Across the Life Course (3)

This course introduces students to frames of reference, theories, and models drawn from occupational therapy, psychology, sociology, anthropology, and the behavioral sciences to address psychosocial issues affecting participation in occupations and in society across the life course. Students explore the experiences of people living with mental health conditions, including the challenges they face engaging in occupation, participating in life situations, and accessing behavioral health care. Students are introduced to evaluation and intervention approaches to promote participation in daily life for individuals with psychosocial conditions. This course also introduces students to the basics of client-centered communication, therapeutic use of self, motivational interviewing techniques, and client advocacy. The course includes a lab which provides opportunities for students to practice and begin developing clinical skills in assessment, intervention planning, treatment strategies, documenting and billing of treatments and outcomes, and developing discharge, referral, and transition plans in practice with individuals with psychosocial conditions. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Formative and summative assessments are used to assess mastery of course content. (3 credits: 2 in-class didactic, 1 hands-on skills lab).

#### **OTH 520 Professional Seminar (1)**

This seminar focuses on socially responsible practice. Students use an occupational justice lens to explore the needs of clients and the communities they serve, with an emphasis on rural and underserved communities. Students are introduced to the concepts of diversity, equity, inclusion, cultural responsiveness, effective communication, and occupational justice. Students interrogate multiple modes of advocacy for recipients of occupational therapy services, socially disadvantaged communities, and the profession and develop a deeper understanding of how advocacy efforts intersect with legislative and policy making processes. Students learn through a combination of lectures and discussion, readings, small group activities, case-based scenarios, and applied civic engagement. Formative and summative assessments are used to assess mastery of course content. (1 credit hours)

#### Interprofessional Education (IPE) Passport

Students are required to complete a minimum of four learning events during the first three semesters of the program. The events are guided by the Interprofessional Education Collaborative (IPEC) core competencies and foster students' awareness of interprofessional education, collaboration and practice, the basic skills needed to be an effective part of an interprofessional team, their professional identity in the context of interprofessional teams, and professional responsibilities in such teams. Students also learn to articulate the distinct value of occupation and to become leaders who advocate for the profession and the individuals, communities, and populations served by occupational therapy. Students learn through interprofessional education activities. Formative and summative assessments are used to assess mastery of course content. (NC: required, no credit)

#### Spring Semester, Year 1

#### OTH 525 Human Capacities II (w/lab) (3)

This course continues the work started in the Human Capacities I course. It addresses the structures, functions, and processes of the human body that support participation in occupation. Student learning begins with analysis and documentation of meaningful activities and occupations using professional terminology from the <u>Occupational Therapy Practice Framework: Domain & Process (4th ed.)</u>. Analysis of activity and occupation is then linked to an exploration of the nervous system (with a focus on neurosensorimotor, neurocognitive, and neurobehavioral functions) and how those functions influence occupational analysis and examination of anatomical structures is then generalized to related occupations in a stepwise approach that gradually expands students' understanding of the transaction between client factors, activity demands, and contexts. Students learn through a combination of lectures and discussion, readings, cased-based scenarios, laboratory activities, small group activity, and standardized patient simulations. Formative and summative assessments are used to assess skills in occupational analysis, movement assessment, neurological and sensory assessment, and mastery of related course content. The course includes a lab. (3 credit hours: 2 in-class didactic, 1 hands-on skills lab)

#### OTH 530 Occupation-based Interventions I (6) (Infants, Children, and Adolescents)

This course provides students foundational knowledge of occupational engagement and human development in early life. Students interrogate the transactional relationship of capacities, personal factors, and contexts that shape occupations in early life. The course also introduces students to the most common mental and physical health conditions treated by occupational therapists in children and adolescents. Drawing on occupational science literature as well as literature from the biological sciences and humanities, students explore the phenomenological experience of occupation, illness and disability for children, adolescents, and families. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. The course includes a lab that provides opportunities for students to begin developing clinical skills and implementing the occupational therapy process. Students learn through a combination of lectures and discussion, readings, reflections, small group activities, laboratory activities, interprofessional education activities, and standardized patient simulations, and interactions with community members. Formative and summative assessments are used to assess mastery of content. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

#### OTH 535 Environment, Technology, and Occupation (3)

This course focuses on the environmental dimensions of occupational performance. Students examine a range of environmental and assistive technologies used in contemporary occupational therapy practice.

Environments include, but are not limited to, home, school, work, community, and virtual environments. The course explores theoretical frameworks that influence the application of technology. Students develop clinical reasoning skills to assess the need for assistive technologies and design appropriate intervention strategies. A wide range of available technologies include, but are not limited to, user interfaces, information acquisition and communication, visual compensations, cognitive augmentation, organization and learning, electronic aids to daily living, and wheelchair handling and seating and positioning systems. Funding and letters of medical necessity related to technology acquisition are also covered. Students examine the transaction among environmental characteristics and occupational performance to adapt or modify environments to enhance performance and participation, including home safety assessment and home modifications. As part of the course, students complete required competencies in the use of telehealth in traditional and non-traditional settings. Students learn through a combination of lectures and discussion, laboratory and small group activities, case-based scenarios, and standardized patients. Formative and summative assessments are used to assess mastery of course content. (3 credit hours: 2 in-class didactic, 1 hands-on skills lab)

#### OTH 540 Foundations of Inquiry II (3)

This course continues the work started in the Foundations of Inquiry I course. Each student will apply the principles of inquiry through developing an initial research question, conducting a literature search, and developing a research proposal, complete with a critical review of the literature. Students begin to learn and engage in the research processes by participating in faculty-led research. Students learn through a combination of lectures and discussion, reflective discussion, and small group activities. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

#### OTH 545 Level IA Fieldwork (1)(Infants, Children, and Adolescents)

This course provides an opportunity for students to engage in skilled observation and selective participation in various aspects of the occupational therapy (OT) process during a full-time, one-week Level I Fieldwork experience. Students will participate in prebriefing and preparatory learning activities prior to the clinical experience, as well as debriefing after clinical experiences. Students will learn to be part of interprofessional teams and how to appropriately interact with individuals/groups/populations, families, caregivers, and healthcare providers. This course will provide students with the opportunity to apply theories and evidence to inform clinical decision making, as well as translate their professional behavior, observation skills, performance skills, and clinical application of their knowledge into practice environments serving infants, children, and adolescents. Experiences may take place in a variety of settings (medical, educational, role emerging, non-traditional) and provide students with the means to apply learned content from previous and concurrent courses. (1 credit hour)

#### Summer, Year 1 (10 Weeks)

#### OTH 550 Occupation-based Interventions II (6)(Adults)

This course provides students foundational knowledge of occupational engagement and human development in adulthood. Theories of behavior are applied to age-normative occupations and roles and students critically interrogate differing representations of occupational engagement and role fulfillment in adulthood. The course also introduces students to the most common mental and physical health conditions treated by occupational therapists working with adults. The course includes a lab that provides opportunities for students to further develop clinical skills in assessment, intervention planning, treatment strategies, treatment modification, documenting and billing of treatments and outcomes, and developing discharge, referral, and transition plans with adults. Pharmacology is discussed in

relation to specific conditions and the impact on the patient and therapeutic process. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussions, readings, reflections, small group activities, laboratory activities, interprofessional education activities, and standardized patient simulations, and interactions with community members. Formative and summative assessments are used to assess mastery of content. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

#### OTH 555 Occupation-based Health Promotion and Chronic Condition Management

This course introduces students to the role of occupation in public health, health promotion, and chronic physical and mental health condition management and prevention, especially among rural and medically underserved communities. Course content emphasizes key chronic conditions of the 21st century. Students inquire as to how historical, geographical, political, socioeconomic, demographic, and policy related factors shape health promotion and chronic condition management and health management occupations. Key concepts introduced in the course include, rurality, health disparities, social determinants of health, public and population health, health promotion, health education, health literacy, and health behavior. Theories of occupation and health behavior are introduced and interrogated. Evidence-based models of rural healthcare delivery and health promotion and disease prevention are examined with an emphasis on applying concepts and models to develop individual, community, and population-based approaches for meeting the health needs of individuals and communities across the life course. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn though a combination of lectures and discussion, reflective discussion, small group activities and community-based outings, and interactions with community members. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

### OTH 560 Level IB Fieldwork (1)(Adults and Older Adults)

This course provides an opportunity for students to engage in skilled observation and selective participation in various aspects of the occupational therapy (OT) process during a full-time, one-week Level I Fieldwork experience. Students will participate in pre-briefing and preparatory learning activities prior to the clinical experience, as well as debriefing after clinical experiences. Students will learn to be part of interprofessional teams and how to appropriately interact with individuals/groups/populations, families, caregivers, and healthcare providers. This course will provide students with the opportunity to apply theories and evidence to inform clinical decision making, as well as translate their professional behavior, observation skills, performance skills and clinical application of their knowledge into adult and older adult practice environments. Experiences may take place in a variety of settings (medical, educational, role emerging, non-traditional) and provide students with the means to apply learned content from previous and concurrent courses. (1 credit hour)

#### Fall Semester, Year 2

### OTH 605 Occupation-based Interventions III (6)(Older Adults)

This course provides students foundational knowledge of occupational engagement and human development in older adulthood. Theories of aging are applied to age-normative occupations and roles and students critically interrogate differing representations of occupational engagement and role fulfillment in later life. The course also introduces student to death and dying as well as the most common mental and physical health conditions that predominantly affect older adults. The course includes a lab that provides opportunities for students to further refine clinical skills in assessment, intervention planning, treatment strategies, documenting and billing of treatments and outcomes, and developing discharge, referral, and

transition plans, including hospice and end of life care. Treatment of visual, perceptual, and cognitive dysfunction is especially emphasized as well as skills necessary to design interventions and programs that enhance community mobility, and support transportation transitions, including community access, driver rehabilitation, and driving cessation. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussion, readings, reflections, small group activities, laboratory activities, interprofessional education activities, standardized patient simulations, and interactions with community members. Formative and summative assessments are used to assess mastery of content. (6 credit hours: 3 in-class didactic, 3 hands-on skills lab)

#### OTH 610 OT Management and Entrepreneurship (4)

This course is designed to foster students' knowledge of the business aspects of occupational therapy service management, entrepreneurship, and community program development, including, but not limited to, ethics and advocacy in promoting socially just and responsive practice, the development of needs assessments, business plans, staffing plans and staff evaluation, financial management, marketing, program evaluation, and strategic planning. Students work with community stakeholders on a semesterlong community program development project. As part of the project, students learn and apply the principles of teaching and learning and health literacy educational approaches to design activities, clinical trainings, and/or caregiver and stakeholder education for persons, groups, communities, and populations. The roles of key stakeholders and contextual factors on the delivery of occupational therapy services are emphasized. Students learn through a combination of lectures and discussion, small group activities, case-based scenarios, and face to face interactions with clients, service organizations, business owners, and representatives from the financial industry. Formative and summative assessments are used to assess mastery of course content. (4 credit hours)

#### OTH 615 Foundations of Inquiry III (3)

In this course, students continue to learn habits of inquiry and the process of contributing to building the professional evidence base though continued engagement in the research processes. Students collect, analyze, and interpret data, prepare a poster to disseminate findings, and complete a final research paper. Different sources of funding for scholarly work are also discussed. Students learn through a combination of lectures and discussion, reflective discussion, and small group activities. Formative and summative assessments are used to assess mastery of course content. (3 credit hours)

#### **OTH 620 Transition to Practice (2)**

This course focuses on (1) leadership, (2) supervisory and managerial roles and relationships, (3) professional development, and (4) transition to practice. Course topics include organizational leadership, leadership styles, effective communication and team dynamics, conflict resolution, and diversity, equity, and inclusion in the workplace. An emphasis is placed on exploring leadership opportunities within the profession, professional opportunities in the academy, and mode of advancing professional knowledge through CEU and advanced certifications. Course content also covers the transition to fieldwork, including criteria for evaluating student academic fieldwork performance, supervision issues, fieldwork experience responsibilities and job search. Opportunities for traditional and non-traditional occupational therapy practice are emphasized. Students learn through a combination of lectures and discussion, case-based scenarios, small group activities, and face to face interactions with clients and advocates. An emphasis is placed on developing habits of thought and action central to effective leadership. Formative assessments are used to assess mastery of course content. (2 credit hours)

### OTH 625 Level IC Fieldwork (1)(Non-traditional)

This course provides an opportunity for students to actively participate with faculty members and/or community partners in innovative community-based experiences that will improve the health needs of diverse, medically underserved, rural communities. Students will gain experience by examining how their professional skills may be harnessed to respond to public and population health needs of the community. Fieldwork experiences may take place in a variety of community and role-emerging settings across the life course, as well as simulation, reflection, preparatory activities, and community projects, to give students the means to apply learned content from previous and concurrent courses. This course will provide students with the opportunity to apply theories and evidence to program development and projects. (1 credit hour)

#### OTH 630 Level ID Fieldwork (1)(Mental Health)

This course provides an opportunity for students to engage in skilled observation and selective participation in various aspects of the occupational therapy (OT) process with individuals, groups, and populations. The mental health rotation utilizes a blended approach of Level I fieldwork and structured learning activities, including simulation, to apply the OT process with emphasis on behavioral health and psychosocial factors. Students will learn to be part of interprofessional teams and how to appropriately interact with individuals/groups/populations, families, caregivers, and healthcare providers. This course will provide students with the opportunity to apply theories and evidence to inform clinical decision making, as well as translate their professional behavior, observation skills, performance skills and clinical application of their knowledge into mental health practice environments. The fieldwork experience may take place in a variety of settings (medical, educational, role emerging, non-traditional) across the life course and provide students with the means to apply learned content from previous and concurrent courses. (1 credit hour)

#### Spring Semester, Year 2 (12 Weeks)

#### OTH 635 Level II Fieldwork A (6)

The purpose of this Level II fieldwork experience is to provide students with an introduction to fulltime occupational therapy practice within a treatment setting. Students gain experience in delivering occupational therapy services to individuals, groups, and populations across the life course in a variety of settings. This course allows application of previously learned skills and knowledge through clinical reasoning and reflective practice. Students will be prepared for entry-level practice in their assigned setting at the conclusion of the Level II fieldwork experience. (Part 1 of 2). (6 credit hours).

#### Summer Semester, Year 2 (12 Weeks)

#### OTH 640 Level II Fieldwork B (6)

The purpose of this Level II fieldwork experience is to provide students with an introduction to fulltime occupational therapy practice within a treatment setting. Students gain experience in delivering occupational therapy services to individuals, groups, and populations across the life course in a variety of settings. This course allows application of previously learned skills and knowledge through clinical reasoning and reflective practice. Students will be prepared for entry-level practice in their assigned setting at the conclusion of the Level II fieldwork experience. (Part 2 of 2). (6 credit hours).



# SCHOOL OF PHYSICAL THERAPY (SOPT)

School of Physical Therapy | 118

## History

Since the early 1800's, physical therapists have been transforming lives through movement. Two major historical events: the poliomyelitis epidemics and the consequences of several wars, resulted in the evolvement of the profession of physical therapy. In 1916 when the polio epidemic became widespread in the United Sates, the need for muscle testing and re-education to restore function grew dramatically. During World War I in 1917, women were recruited to treat casualties of war and help rehabilitate soldiers back on their feet. Referred to as 'reconstructive aides' they became the predecessors to today's modern physical therapist. Among them, Mary McMillan who was elected the first President of the American Women's Physical Therapy Association in 1921. Today, the association, now known as the American Physical Therapy Association (APTA), has been in existence for over 100 years.

The first school of physical therapy was established at Walter Reed Army Hospital in Washington, DC, following the outbreak of World War I. Research was the catalyst for the physical therapy movement. The first physical therapy research was published in the United States in March 1921 in "The PT Review" (now known as Physical Therapy (PTJ)). By 1940, the majority of physical therapy educational programs shifted from the hospital to the university setting, which marked an important new trend in education of physical therapy. Programs moved from physical therapist earning a bachelor's degree in another closely related field and then obtaining a certificate in physical therapy, to receiving an entry-level physical therapy bachelor's degree.

It was not until 1954 that the APTA developed a standardized competency exam for state licensing boards. Licensure is now required in all 50 states to practice as a physical therapist. By the early 1990s, the profession had evolved significantly and there were two levels of degrees with which a physical therapist could graduate: a four-year bachelor's degree and a professional master's degree. Talks of developing a doctor of physical therapy (DPT) program started back in 1986 and two years later the decision was made to proceed. The first eight-semester professional DPT program was launched in 1993 at Creighton University. In 2016 the clinical doctorate or "DPT" became the only degree conferred by CAPTE accredited education institutions.

Today, physical therapy is a career in high demand. As a physical therapist, you might find yourself working with anyone from an older adult recovering from a stroke to a child with a developmental disability to an athlete rebounding from a sports injury. You could assist with everything from pain management, restoration of movement and function to preventive care, working in various settings including hospitals, schools, long-term rehabilitation facilities, retirement communities, outpatient clinics, or patients' homes.

## Doctor of Physical Therapy

The DPT program in the School of Physical Therapy (SOPT) is a 112-credit hour, 8-semester, blended curriculum model building on a combination of clinical, foundational, and behavioral sciences for the movement system, practice management, and professional practice themes, along with integrated clinical experiences (ICEs) (semesters 2,4,5,7) and 34 weeks of full-time clinical experiences (FTCEs) (semesters 3,6,8) with emphasis on rural and medically underserved clientele.

The SOPT prepares physical therapists who are knowledgeable, reflective generalists who will contribute to evidence-based, guality care in a compassionate and professional manner as a competent member

of the interprofessional team in rural and medically underserved communities. This solid foundation in the signature pedagogy of applied movement science and collaborative practice will allow graduates to assume the roles of a movement expert, researcher, educator, consultant, administrator, leader, and advocate within the interprofessional health care team.

# **PNWU-SOPT** Mission and Philosophy

#### Mission

Educating future physical therapists as movement system experts who will infuse innovative, evidenceinformed practice in rural and medically underserved communities throughout the Northwest<sup>1</sup>.

#### Vision

Transforming movement and function to revolutionize the health of rural and medically underserved communities.

#### **Our Commitment**

The DPT program at PNWU embraces the University's mission. We are committed to educating and training physical therapists in a culture of interprofessional teaching, learning, and scholarship that emphasizes returning to serve rural and medically underserved communities throughout the Northwest<sup>1</sup>.

#### **Our Philosophy** We believe:

Physical therapists can impact health and health care delivery across the lifespan in rural and medically underserved communities through their unique role as movement experts.

The future of physical therapy practice rests in our graduates continually demonstrating the value of movement and function for health and longevity, translating evidence for practice into action and advocating for access to physical therapy in rural and medically underserved communities.

A student-focused, patient-centered, dynamic, and collaborative learning environment nourished within a culture of belonging, compassion, innovation, interprofessional collaboration, and social responsibility will develop future leaders who will launch new visions of physical therapy for future generations.

<sup>1</sup>Northwest (NW) is categorized as Alaska, Idaho, Montana, Oregon and Washington

## PNWU-SOPT Student, Faculty, and Program Goals

The program has goals related to students, faculty, and the program that are based on the program mission and vision, reflective of contemporary physical therapy education, research, and practice, and lead to expected program outcomes.

Student-related goals are to prepare the DPT graduate who will:

- physical therapy practice.

1. Integrate the biological, physical, behavioral, and movement sciences necessary for entry-level

2. Communicate through words and actions in a professional, compassionate, and ethical manner in all encounters with patients/clients, peers, faculty, families, other professionals, and community/ professional leaders.

- 3. Practice in a collaborative manner that is consistent with established legal and professional clinical practice standards.
- 4. Demonstrate sound clinical decision-making skills, including clinical reasoning, clinical judgment, differential diagnosis, reflective practice, and self-reflection/assessment that can be applied in the rural or medically underserved community setting.
- 5. Apply existing research to inform clinical decision-making skills and innovative physical therapy interventions based on solid theoretical constructs.
- 6. Lead to advocate in communities and the physical therapy profession.

Faculty-related goals are to attract and retain faculty who:

- 1. Exemplify excellence in the scholarship of teaching and maintain currency in clinical practice related to their teaching, service, and/or scholarship.
- 2. Demonstrate a commitment to collaboration, service, scholarship, and leadership in the institution, the community, and the profession.
- 3. Engage in one or more areas of professional growth and scholarly/creative activities that align with the program's mission and vision.

Program-related goals are to offer a program that will:

- 1. Matriculate diverse students who exceed gualifications from Northwest1, rural, and medically underserved communities or with the desire to work in Northwest1, rural, or medically underserved communities upon graduation.
- 2. Seek and be responsive to student and community feedback.
- 3. Model best practices in clinical care including collaborative interprofessional practice, clinical instruction, and outreach/service to the community.

# **SOPT** Admissions

PNWU seeks to admit students compatible with the University mission and who have the prerequisite knowledge, skills, and abilities to assure a reasonable probability of success. Student Admissions Policy is located at PNWU.edu.

## **Application Requirements**

The minimum age to matriculate at PNWU is 18 years of age and the applicant must be a US Citizen, permanent resident, or Deferred Action for Childhood Arrivals (DACA) status. The application to PNWU DPT program begins by submitting a primary application through the Physical Therapy Centralized Application Service (PTCAS). Applicants must designate PNWU School of Physical Therapy to receive the application.

A verification of the information provided on the application will take place. This may take as much as 30 days or longer. PNWU School of Physical Therapy will review the application only after the verification is complete by PTCAS. Applicants should review the PTCAS Quick Start Guide to assist them in submitting their application properly.

To apply for admission, applicants must have the following:

- their last term.
- courses and pass any course needed to repeat on the first attempt.
- because it is over seven years old, it does not count as a repeated course.
- considered only if a combined course.
  - psychology have always been allowed to be online.
- courses cannot be used for prerequisite requirements.
- however, a 3.0 GPA or higher is highly recommended to be competitive.
- (PTCAS).
- Official transcripts from all colleges and universities attended.
- Graduate Record Examinations (GRE) scores.
  - At Home Option.
- and one from another source).
  - committee to make a decision on an individual basis.

• Hold or be eligible to receive a bachelor's degree from a regionally accredited college or university by the end of spring semester/quarter prior to matriculation to the program. Any major is accepted. • Complete ten prerequisite courses in the general sciences (see below for list). All prerequisite courses must be at a C or higher. Students may have two prerequisite courses in progress for

• COVID-19 changes: The Admission Committee prefers a letter grade, however, when not able due to the COVID-19 situation, we will consider CR/NC, P/NP, S/U.

• Students must receive a passing grade on the first attempt in at least six of the prerequisite

Coursework older than seven years is not accepted. If a student retakes a prerequisite course

 All science courses must include laboratories and cannot be at an introductory level. Human Anatomy and Physiology must be taken from the Anatomy, Physiology, Anatomy & Physiology, Biology or Zoology department. Combined Human Anatomy and Physiology courses will be

 COVID-19 changes: Online Lab Courses completed in Spring 2020, Summer 2020, Fall 2020, Spring 2021 (TBD-ongoing as COVID-19 requires all courses to be online) will be accepted for lab prerequisites. Note: Online courses for science prerequisite lectures, statistics, and

 Advanced placement credits can fulfill the course requirements if they are accepted for credit by your degree granting institution. CR/NC grades, correspondence courses, or independent study

• There is no minimum undergraduate GPA, last 60-unit GPA, or prerequisites GPA requirement,

• Applications are submitted through the Physical Therapist Centralized Application Service

• COVID-19 changes: GRE is offering an online, at-home testing option- We will continue to require applicants to take the GRE. If you have not done so already, please look into the GRE

• Three letters of recommendation (one from a professor whom you have taken a course from within the United States, one from a physical therapists licensed in the United States is recommended

 COVID-19 changes: No changes currently. \*\*In order to request a waiver for this requirement, you must submit a letter explaining your situation and request a review by our admission

Provide evidence that you have seriously considered the profession of physical therapy as a good fit for your personal goals. Doing this may involve completing observation/shadowing of a physical therapist in practice or volunteering at a health care facility to gain a greater understanding of the field, or research into the profession in another way that fits your needs and learning style. However, it is critical that you understand and embrace the scope of work, values for care, and the opportunities for physical therapy to contribute to the health of underserved communities.

• COVID-19 changes: We understand that applicants may have difficulty obtaining or completing observation experiences as facilities adjust to providing care during this public health pandemic. We will review what you have completed for observation hours

and review your response to the supplemental question on PTCAS.

Satisfactory completion of the following prerequisites prior to matriculation:

- **1. Human Anatomy** with lab: (3-4 semester credits or 5-6 quarter credits; do not recommend online or hybrid courses for lab).
- **2.** Human Physiology with lab: (3-4 semester credits or 5-6 quarter credits; do not recommend online or hybrid courses for lab). NOTE: A two-semester course sequence or three-quarter course sequence combined anatomy and physiology course will be considered.
- 3. Biological Sciences with lab: (8 semester credits or 12 quarter credits; not Botany).
- **4. General Chemistry** or Inorganic and Organic or Biochemistry with lab (8 semester credits or 12 quarter credits; do not recommend online or hybrid courses for lab).
- 5. Physics with lab, including mechanics, heat, light, sound, and electricity (8 semester credits or 12 quarter credits; do not recommend online or hybrid courses for lab).
- **6. Psychology** (3 semester credits or 5 quarter credits), Abnormal Psychology or Psychological Aspects of Disabilities (preferred).
- 7. Statistics (3 semester credits or 5 quarter credits)

Note:Inadditiontotheprerequisites,acceptedstudentsmustcompletea **MedicalTerminology** course prior to the start of the program to prepare them for the clinical science courses in the DPT program. It is necessary for Foundations courses, Applied Pathophysiology, and professional practice courses.

### Program Selection Criteria

The DPT program in the School of Physical Therapy accepts a maximum of 50 students for each new class of student physical therapists which starts in the fall. The DPT Admission Committee will consider applications from all qualified individuals; however, in order to meet the mission of the School of Physical Therapy, priority will be given to those students from the Northwest (Alaska, Idaho, Montana, Oregon, and Washington) or from a rural or medically underserved area (MUA). PNWU uses the Rural Assistance Center online tool (found at: <a href="https://www.ruralhealthinfo.org/am-i-rural">https://www.ruralhealthinfo.org/am-i-rural</a>) for determining if an address is rural or located in a MUA or serves a medically underserved population (MUP).

Selected students will be invited for an on-campus (or virtual) interview (see below).

After the initial assessment, selected applicants are invited to a formal interview. After the interview, the Admission Committee reviews the applicant files and make recommendations to the program director. Applicants are notified as soon as final admission decisions are made.

#### Interview (Visitation Day)

All applicants are interviewed in small groups with two panelists per group. Interview panelists are provided a list of names prior to visitation day to determine any conflict of interest.

Visitation day is an opportunity for PNWU to get to know applicants and for applicants to get to know PNWU. Opportunities to communicate directly with faculty and staff will be provided. The dress for the day is professional.

#### Notification

Final admission decisions are made by the program. Applicants are notified via email and the Self-

Service portal is updated as soon as a final admission decision has been made.

A nonrefundable acceptance fee of \$500 is required from accepted applicants. The acceptance fee will be applied to the student's first term of tuition.

Acceptance is conditional until all required documentation is received and completed to PNWU's satisfaction.

PNWU does not usually defer admission, requests submitted to the SOPT Admission Committee will be reviewed, decided, and the applicant notified.

Note: Intentional misrepresentation or omission of information relative to scholastic records, test records, background reports, etc. will subject the applicant to rescinded admission or a student to dismissal. The University reserves the right to deny admission to any applicant for any reason in deems sufficient.

# **SOPT** Academics

## SOPT <u>Academic Calendar</u>

Summer Term Begins
Juneteenth (No on-campus classes)
Last Day to Withdraw with a Partial Tuition Refu
U.S. Independence Day
Summer Term Ends
Summer Term Grades Due
Orientation for First-Year Students
Fall Term Begins First-Year Students
White Coat Ceremony
Fall Term Begins Second-Year Stuents
Last Day to Withdraw with a Partial Refund
Labor Day (No on-campus classes)
Constitution Day
Mid-Term for Fall Term
Veterans Day (No on-campus classes)
Thanksgiving Break (No on-campus classes)

	2023-2024
	June 5, 2023
	June 19, 2023
Ind	June 23, 2023
	July 4, 2023
	August 4, 2023
	August 11, 2023
	August 7-11, 2023
	August 7, 2023
	August 11, 2023
	August 14, 2023
	August 25, 2023
	September 4, 2023
	September 18, 2023
	October 6, 2023
	November 10, 2023
	November 20-24, 2023

<i>Fall Term Ends</i> Second-year students First-year students	December 8, 2023 December 15, 2023
Fall Term Grades Due	December 22, 2023
Spring Term Begins	January 8, 2024
Last Day to Withdraw with a Partial Refund	January 26, 2024
Presidents' Day (No on-campus classes)	February 19, 2024
Mid-Term for Spring Term	March 8, 2024
Spring Recess (No on-campus classes)	March 11-15, 2024
Spring Term Ends	May 3, 2024
Spring Term Grades Due	May 10, 2024
Memorial Day (No on-campus classes)	May 27, 2024

### Curriculum

The professional coursework developed is grounded in the mission of the program and the university. The curriculum plan is a blended design with traditional and systems-based approaches. The plan embeds movement systems with professional practice and practice management themes. Contemporary physical therapy practice and the use of evidence-based practice are incorporated into the DPT curriculum coursework. The curriculum includes a combination of didactic, laboratory, service-learning, and clinical experiences which address the development of the student in cognitive, affective, and psychomotor domains. Course teaching methodology and instruction methods include content delivered through synchronous and asynchronous didactic lecture, standardized patient simulation, laboratory, experiential and service-learning experiences of movement, clinical practice, teaching, and learning. The curriculum directly reflects the skills, professionalism, and critical reasoning necessary for entry-level, contemporary physical therapy practice and for the life-long learning and leadership desired across the span of graduates' careers. The three pillars of which the curriculum is built upon are:

<u>Movement Sciences</u> including anatomy, physiology, genetics, exercise science, biomechanics, kinesiology, neuroscience, pathology, pharmacology, diagnostic imaging, history, nutrition, and psychosocial aspects of health and disability.

**Professional Practice** including cardiovascular, endocrine and metabolic, gastrointestinal, genital, reproductive, hematologic, hepatic and biliary, immune, integumentary, lymphatic, musculoskeletal, nervous, respiratory, renal and urological systems, system interactions, differential diagnosis, and the medical and surgical conditions across the lifespan commonly seen in physical therapy practice.

**Behavioral** Sciences including content and learning experiences in communication, ethics, values, management, finance, teaching, learning, law, clinical reasoning, evidence-based practice, and applied statistics.

## Letter Grade Criteria

All courses (with exception of those graded credit/no credit\*) offered in the DPT program are graded according to the following standard:

Grading Criteria\*\*:

A = 90.0 and greater	D = 60.0 to 69.99
B = 80.0 to 89.99	F = less than 60.0
C = 70.0 to 79.99	

\*Full-time clinical experiences (PHTH 600, 700, and 790), capstone (623, 624, and 725), and clinical competence in patient management courses (PHTH 550, 650, 750) are graded credit/no credit (CR/NC). See course syllabi for specific standards required to receive credit (CR) in these courses.

\*\*Grades are not rounded to the nearest whole numbers (e.g. 89.99% is not 90%).

### Grade Requirements for DPT Student by Semester and Overall

The following represent grade requirements for DPT students by semester and overall. Students will enroll in and complete all required courses in sequence. Failure to complete a course in sequence may cause a student to wait a full year before resuming the program. Any student receiving a course grade less than C (or CR) or do not obtain at least a B in integrated clinical experience (ICE) courses will not be able to continue in the program, regardless of semester or overall GPA.

Students may access their grade report from the PowerCAMPUS Self-Service system at the close of each academic term. Their Academic Standing status will be reported on the grade report. The student will receive a letter of Academic Standing if placed on Warning or Probation status. Probation and dismissal letters will become part of the permanent academic record.

A student on Warning or Probation status may not participate in PNWU-sponsored extracurricular events or organizations, is not eligible for PNWU sanctioned travel, is not permitted to be listed on any active research study other than capstone project and may not run for or hold the position of executive, class, or club officer. At the discretion of the Student Progress Committee, warning or probation status may include additional restrictions from activities the Committee deems detrimental to academic performance.

The imposed academic standing will be in effect until the student is in good academic standing. Good academic standing is regained by successful remediation of the failed standard of progress.

Academic warning shall have no effect on a student's financial aid and will not appear on the transcript. Probation status may affect a student's eligibility for financial aid and will not appear on the transcript. Please refer to the Financial Aid policies for more information.

Student Progress Committee meetings with students are private and confidential including, but not limited to, the names of participants, proceedings, discussion, minutes, and findings. The following are prohibited in all Student Progress Committee meetings unless otherwise authorized in writing by the program director and Student Progress Committee chairperson: 1) electronic recording of the meeting,

except for official minutes; 2) legal counsel; and 3) uninvited individuals.

#### **Overall**

Students in the program must demonstrate competence in BOTH academic and clinical components of the curricular course work.

At the end of the academic year students must have completed 67 percent of their cumulative attempted credits to be on track to complete the program within 150% of the published program length. Students must have a cumulative 3.00 GPA while in the program

- A student who falls below a 3.00 cumulative grade point average shall be placed on academic warning.
- The student shall raise the cumulative GPA to a minimum of 3.00 in the following academic term to be removed from academic warning. If the student is unable to raise the cumulative GPA to a minimum of 3.0 the following semester, the student may not be allowed to move forward in the program. The student will be referred to the Student Progress Committee. The following outcomes may occur, depending on the student's total course performance with consideration of any mitigating factors (e.g., family crisis, illness):
  - a. Disqualification from the program
  - b. A remediation process placing the student on probation and in the following cohort. The Committee, in consultation with the program director and student will determine the specific remediation plan.

#### Course

Any student receiving a course grade less than C (or CR) will not be able to continue in the program, regardless of semester or overall GPA.

Students enrolled in integrated clinical experience (ICE) courses (PHTH 543, PHTH 644, PHTH 645, and PHTH 746) must obtain a course grade of B (80% or higher).

Students must receive credit (CR) in all: full-time clinical experience (FTCE) courses (PHTH 600, PHTH 700, and PHTH 790); Capstone courses (PHTH 646, PHTH 647, PHTH 748; and Clinical Competence in Patient Management courses (PHTH 550, PHTH 650, PHTH 750).

A student may not advance to the next academic year with a failing or incomplete grade in a required course. Course withdrawals and repeats are allowed as part of a probation status and count as attempted credits. The student's probation status will be evaluated at the end of the next term. Regaining good academic standing may be achieved by successful remediation of the failed standard of progress.

### Appeal and Remediation

The student will meet with the Student Progress Committee and present any extenuating circumstances which directly contributed to poor academic performance. The appeal must explain why the student failed to make satisfactory progress and what has changed in the situation that will allow them to make satisfactory progress during the next term. The student must appear in person or via video conferencing to make a personal statement and answer any questions by the committee.

If the Student Progress Committee determines the student should be able to meet the academic progress

standards the student will be placed on probation and an adjusted academic plan developed. The student will be reviewed at the end of each term to determine if meeting academic progress standards.

If the Student Progress Committee recommends that the student be dismissed the student will be notified by certified letter and secure email. If the student does not believe due process was properly followed the students may appeal the dismissal decision by submitting a detailed letter to the provost within five business days after receiving the dismissal notice. The decision of the provost is final, and the student is notified by certified letter and secure email.

## Doctor of Physical Therapy Degree Requirements

The curriculum of the Doctor of Physical Therapy program progressively builds upon previous courses. The student must complete certain courses in order or progression to comprehend the foundation on which the curriculum builds. Academic progress requires the student complete each academic year in the progression offered.

Course	Course #	Credits		
First-Year Courses				
Foundations of Clinical Practice I	PHTH 500	3.5		
Foundations of Clinical Practice II	PHTH 501	3.5		
Gross Anatomy	PHTH 505	4.5		
Applied Neuroscience	PHTH 506	3.5		
Lifespan Development	PHTH 510	3.0		
Applied Pathophysiology	PHTH 511	3.0		
Movement Science I	PHTH 512	3.0		
Movement Science II	PHTH 513	3.0		
Exercise Physiology	PHTH 514	2.0		
Professional and Interprofessional Practice I	PHTH 520	2.0		
Professional and Interprofessional Practice II	PHTH 521	2.0		
Integrated Rural Clinical Outreach I	PHTH 543	1.5		
Evidence Informed Practice	PHTH 545	3.0		
Clinical Competence in Patient Management I	PHTH 550	0.5		
Total First-Year Credits				
Second-Year Courses				
Clinical Experience I	PHTH 600	4.5		
Foundations of Clinical Practice III	PHTH 602	3.5		
Neurological Movement System I	PHTH 607	4.5		

Capstone III Clinical Competence in Patient Management III	PHTH 748 PHTH 750	1.5 1.0
Integrated Rural Clinical Outreach II	PHTH 746	3.0
Clinical Reasoning II	PHTH 736	3.0
Management of Select Populations II	PHTH 727	2.0
Administration and Leadership	PHTH 723	2.0
Geriatric Physical Therapy	PHTH 722	3.0
Pediatric Physical Therapy	PHTH 709	3.5
Clinical Experience II	PHTH 700	4.5
Third-Year Courses		
	tal Second-Year Credits	42.5
Clinical Competence in Patient Management II	PHTH 650	1.0
Capstone II	PHTH 647	2.5
Integrated Clinical Practice II Capstone I	PHTH 645	1.0
Integrated Clinical Practice I	PHTH 644 PHTH 645	1.5 1.5
Clinical Reasoning I	PHTH 635	2.0
Management of Select Populations I	PHTH 626	2.0
Cardiopulmonary Movement System	PHTH 625	3.5
Professional and Interprofessional Practice III	PHTH 622	2.0
Musculoskeletal Movement System II	PHTH 621	5.0
Musculoskeletal Movement System I	PHTH 620	4.5
Neurological Movement System II Musculoskeletal Movement System I	PHTH 608	3.5 4.5

# of responsibility for patient care and integrity in the conduct of clinical activities

- and Board of Trustees of PNWU
- etc.

Attends, in person, the commencement ceremony held in May of the third year. In special circumstances, DPT students may be allowed to participate in the commencement ceremony prior to fulfilling all degree requirements (including successful completion of full-time clinical experiences). However, participation in the ceremony does not guarantee the student will be granted the DPT degree.

## **Requirements for Practice**

Each recipient of the DPT degree must pass the National Licensing exam and fulfill the requirements of the state licensing board of the state in which they choose to practice. These requirements may vary widely and are regulated by the laws of each state.

### Graduation Requirements

A student who has fulfilled all the academic requirements within 150 percent of their three-year program, except where an exception is required by law, will be granted the degree of Doctor of Physical Therapy provided the student:

- Has complied with all the curricular, legal, and financial requirements of the University
- Has demonstrated the ethical, personal, and professional qualities deemed necessary for the successful, continued study and practice of physical therapy
- Can meet the minimal technical standards, see specifics in SOPT Student Handbook.

• Has demonstrated suitability for the practice of physical therapy as evidenced by the assumption

Has obtained approval from the Student Progress Committee, faculty, program director, president,

Has attended and completed required exit sessions as determined by PNWU i.e. loan counseling,

# **SOPT Course Information**

#### PHTH 500 Foundations of Clinical Practice I (3.5)

The first in a series of three courses focused on clinical skills and patient management processes in the physical therapy setting. Foundational knowledge and skills related to the medical interview, motivational interviewing, basic examination procedures are developed and form the basis for systems-based patient management throughout the curriculum. Laboratory sessions focus on foundational psychomotor skills including, but not limited to infection control, body mechanics, safety, proper draping, vital signs, palpation, neuromuscular screen, the application of goniometry for assessment of range of motion, manual muscle testing, and anthropometric measures. The inclusion of defensible documentation utilizing the patient/ client management model with appropriate medical terminology reflects the International Classification of Function framework. A combination of lecture, laboratory, small group, cased-based learning, with use of standardized patients (SPs) will enhance student learning. Formative assessment experiences in the form of clinical communication such as SBAR (situation, background, assessment, recommendation) and the communication assessment tool are reinforced. (2 hr lect/3 hr lab)

#### PHTH 501 Foundations of Clinical Practice II (3.5)

This course is a continuation of PHTH 500 with further application of physical therapy examination, evaluation, and treatment skills commonly used in physical therapy practice. Instruction will include, the integumentary screen, application of personal protective equipment, advanced transfer techniques, functional balance testing, basic heat/cold interventions including ultrasound. Additionally, students will be introduced to components and prescriptions of therapeutic exercise and movement-based intervention. A combination of lecture, laboratory, small group, cased-based learning, with reinforcement and practice of learned skills through the use of the standardized patient (SP) will enhance student learning. Students will encounter acute and chronic problems in diverse patient centered cases and apply their movement science knowledge to promote readiness for clinical education. Concepts of empathic communication and cultural humility will be reinforced. (2 hr lect/3 hr lab)

#### PHTH 505 Gross Anatomy (4.5)

This lecture and dissection/pro-section-based course integrates Doctoral Physical Therapy and Osteopathic Medicine students. The content is divided into four units, based on regional anatomy: back, upper limb, lower limb, and thorax. Lectures on fundamental radiological anatomy related to the area under study occurs near the end of each unit. Basic neuroanatomy is integrated throughout the course as a precursor to PHTH 506 Applied Neuroscience. This course provides the student with a solid knowledge base in gross, neurologic, and radiologic anatomy. The regional anatomic presentations are essential for preparing healthcare professions to integrate patient presentation for application of clinical differential diagnosis and treatment imperative as an effective doctoral physical therapist practitioner. (2 hr lect/4 hr lab)

#### PHTH 506 Applied Neuroscience (3.5)

Advanced study of structures, organization, and function of the nervous system with emphasis on the neuroanatomical structures and neurophysiological functions of the motor and sensory systems that regulate movement. Understanding clinical manifestations seen in various neurological diseases is the foundation for evaluating and treating patients with neurological disorders. Human brain specimens will supplement lecture material. Other lab activities emphasize elements of the neurologic examination and apply common outcome measures and assessment tools. Clinical skills will be reinforced and practiced with volunteers with various neurological diagnoses from the community. Neuroradiology, focusing on

the central and peripheral nervous system, spine, head, and neck using neuroimaging examples are also presented. (2 hr lect/3 hr lab)

#### PHTH 510 Lifespan Development (3)

Normal and abnormal human embryonic development will set the stage for the mechanisms of and clinical relevance for the establishment of normal development of: gross motor, fine motor, language, cognition, psychosocial, and play skills across the lifespan. The foundation of movement analysis is established through the context of neuromotor control development which underlie skilled performance in everyday functional behaviors from infancy through older age. Applied relevance of current perspectives in motor control and learning will be addressed through application of current principles to understand optimal movement development across the lifespan. Students will be exposed to live examples to integrate age related development across the lifespan. (3 hr lect)

#### PHTH 511 Applied Pathophysiology (3)

The foundation of basic histology and cell function will be used to promote the study of pathophysiology's disruption of homeostasis and the discerned impact on movement systems, the cornerstone of physical therapy practice. Students learn to understand their role as a physical therapy diagnostician at the level of pathology within the framework of differential diagnosis. Includes cardiovascular, pulmonary, endocrine, digestive, renal, genital, immune, hematologic, neurological, musculoskeletal, and integumentary systems. Disease definition, incidence, etiology, pathogenesis, clinical manifestations will be discussed. Regulatory mechanisms to maintain homeostasis will be emphasized. Genetic factors and how they influence risk, progression, outcomes, and response to rehabilitation interventions are also emphasized. (3 hr lect)

#### PHTH 512 Movement Science I (3).

Principles, theories, and applications of static and dynamic biomechanics are presented as it applies to human movement and the study of specific structures involved in the achievement of movement. Emphasis is on the integration of theory, ergonomics, structured movement analysis of activities of daily living, through the application of the International Classification of Functioning, Disability and Health (ICF) model informs clinical decision making within physical therapy practice. The normal gait cycle phases will be emphasized including gait kinetics. Laboratory sessions will include observation and analysis of human movement and function; outcome measures that define the function of movement and application to clinical practice will be explored. Introductory material related to basic mobility and components of normal gait will be presented to reinforce principles of dynamic analysis. (2 hr lect/2 hr lab)

#### PHTH 513 Movement Science II (3)

Advanced study of normal and abnormal gait, principles of ergonomics, biomechanics of posture and interpretation of functional capacity evaluations. Students will learn to assess normal and abnormal gait of selected pathologies which commonly presents in physical therapy practice. Conditions and impairments requiring lower quarter orthotic and prosthetic intervention will be presented, including pre/post op care, examination/evaluation, device design and prescription, proper device fitting and training. Outcome measures commonly administered in patients with gait deficits will be highlighted. Lab activities emphasize advance analysis of pathological movement through motion analysis technology, and rehabilitation interventions for individuals utilizing orthotics or prosthetics for functional mobility. (2 hr lect/2 hr lab)

#### PHTH 514 Exercise Physiology (2)

Systems approach to the body's response and adaptation to exercise training interventions within physical

therapy practice. Students will interpret the influence of static and dynamic factors of physical activity within the context of acute response and chronic physiologic adaptations based upon intensity, frequency and duration of exercises and rest. The prescription of exercise for specific populations are emphasized. The effect of nutrition and exercise across the lifespan are also highlighted. (2 hr lect)

#### PHTH 520 Professional and Interprofessional Practice I (2)

The first in a series of three courses that integrates diverse interprofessional perspectives to prepare students for effective practice as collaborative team members. The Interprofessional Education Collaborative (IPEC) core competencies will be reinforced to foster team-based and patient-centered practice. This course addresses professional behavior standards in relation to patient care interaction and collegial relationships including roles and responsibilities in relation to physical therapist assistants. The preparation of students to manage professional and ethical responsibilities of the physical therapy practice in the delivery of health care services such as application of core values, the physical therapist practice act, and APTA code of ethics. TeamSTEPPs training will be used to inform students of techniques and strategies to improve patient safety and interprofessional communication. This course incorporates cultural competency for addressing diversity, patient learning styles, patient education, patient health behavior models, conflict resolution, and issues of professional advocacy are also addressed. (2 hr lect)

#### PHTH 521 Professional and Interprofessional Practice II (2)

The second in a series of three courses that will integrate diverse interprofessional perspective to prepare students for effective practice as collaborative team members. Topics relative to healthcare delivery models will focus on the healthcare system in the United States, rural, and community health. The course reviews community health services, prevention, wellness, health policy, reimbursement, fraud, and the professions obligation as a mandated reporter. Advocacy will be addressed through the WA State Legislative Impact Day. (2 hr lect)

#### PHTH 543 Integrated Rural Clinical Outreach I (1.5)

This experiential service-learning course is designed to engage students in analyzing healthcare access through a community needs assessment, health literacy instruction, social determinates of health, and interprofessional clinical practice in rural and medically underserved areas. Students will develop an understanding of the demographics, economics, and structure of the rural healthcare delivery system in America, with a concentration to the diverse population found in the Northwest. Additionally, current Federal and state health policy will be examined with special attention on reports from the Center for Rural Affairs and reform legislations addressed by the U.S. Congress and the White House. Primary, secondary, and tertiary care models will be discussed with emphasis on medical screening, referrals, interprofessional collaborative practice, and physical therapist scope of practice. Students will work under the direction of licensed physical therapy faculty at various community rural health care facilities. (0.5 hr lect/2 hr lab/ clinic)

#### PHTH 545 Evidence Informed Practice (3)

Application of the principles of evidence-based practice to inform clinical decision making. Students will become proficient with application of PICO (patient problem, intervention, comparison, outcome) strategy for literature search, application of the methods of scientific inquiry including AMA formatting, research theory, design, methods, and measurement. Statistical analysis will assist students with the ability to draw research conclusions, assure the validity of research evidence for clinical practice application and learn specific statistical tests utilized for descriptive and inferential analysis of experimental research data. Understanding of research design, methods, and statistical assessment will be captured through a critical analysis of the literature (CAT) assignment to inform the process for the application of a systematic review of the literature as a precursor for the capstone project. (3 hr lect)

#### PHTH 550 Clinical Competence in Patient Management I (0.5)

Clinical laboratory simulation methods will be used to assess students' ability to formulate a plan of care based on the patient/client management model. Students' knowledge, clinical reasoning, and clinical practice skills will be assessed utilizing a simulated Standardized Patient emphasizing the first year of coursework. The student must pass this exam to enroll in PHTH 600 Clinical Experience 1 (CR/ NC) (1 hr lab)

#### PHTH 600 Clinical Experience I (4.5)

This nine-week full-time clinical experience during summer semester following completion of Year 1 allows the student to apply didactic knowledge, foundational professional clinic skills, clinical reasoning, as well as incorporate and refine cognitive, affective, and psychomotor skills in a clinical setting. Comprehensive examination, evaluation, and intervention will be used to manage the physical therapy patient. By the end of the clinical experience, students are expected to demonstrate advanced beginner to intermediate performance levels on the Physical Therapist Clinical Performance Instrument Web (PT CPI). CR/NC grading only.

#### PHTH 602 Foundations of Clinical Practice III (3.5)

Continuation of PHTH 500 and PHTH 501 with further application of physical therapy examination, evaluation, and treatment skills commonly used in clinical practice. Advanced theories and principles will be presented related to pain science, treatment of chronic pain, tissue healing, electrophysiological modalities and electro-neuromuscular stimulation for motor performance, nerve function, pain management and tissue repair. Critical appraisal of current evidence examines the physical and physiological effects of these modalities, with emphasis on pain, inflammation, tissue healing, and muscle reeducation. Clinical decision-making emphasizes the appropriate selection of physical agents and treatment parameters based on patient indications and contraindications/precautions with focus on desired treatment effects. Laboratory sessions develops skills for the safe and effective clinical application of physical agents and therapeutic modalities. A combination of lecture, laboratory, small group, case-based learning, standardized patient (SP) will enhance student learning. Formative assessment experiences with standardized patient encounters, and reflections will further assist integration and application of concepts presented in the course. (2 hr lect/3 hr lab)

### PHTH 607 Neurological Movement System I (4.5)

Management of individuals with neurologic health conditions, with emphasis on acquired brain injury including stroke/cardiovascular accident, Parkinson's, other balance and vestibular disorders, based on neurophysiological and patho-kinesiological mechanisms that result in movement system impairments in body structure/function, activity limitations, and participation restrictions. A focus on the development of advanced knowledge and application of skill during patient/client screening, examination, evaluation, outcome measures appropriate for this population, development of a comprehensive plan of care, and clinical decision making using the best evidence for application of treatment procedures across the continuum of care. Correlation of deficits in these neuro populations will be completed with advance diagnostic imaging examples. Emphasizes the application and integration of motor control/ learning, theoretical constructs, evidence-based practice, and the patient/client management model. (3 hr lect/3 hr lab)

#### PHTH 608 Neurological Movement System II (3.5)

Management of individuals with neurologic health conditions, with emphasis on traumatic brain injury, spinal cord injury, Guillain Barre syndrome, amyotrophic lateral sclerosis, and multiple sclerosis, based on neurophysiological and patho-kinesiological mechanisms that result in movement system impairments in body structure/function, activity limitations, and participation restrictions. A focus on the development of advanced knowledge and application of skill during patient/client screening, interpretation of advanced diagnostic modalities/imaging, examination, evaluation, outcome measures appropriate for this population development of a comprehensive plan of care, and clinical decision making using the best evidence for application of treatment procedures across the continuum of care. Correlation of deficits in these neuro populations will be completed with advance diagnostic imaging examples. Emphasizes the application and integration of motor control/learning, theoretical constructs, evidence-based practice, and the patient/client management model. (2 hr lect/3 hr lab)

#### PHTH 620 Musculoskeletal Movement System I (4.5)

The first in a series of two courses building on first-year content within the movement sciences. Analysis of musculoskeletal movement system impairments in body structure/function, activity limitations, and participation restrictions of the extremities will be highlighted. Emphasis on physical assessment, interpretation/evaluating of examination findings including outcome measures, application of therapeutic intervention methods such as joint mobilization/manipulation, soft tissue mobilization, the rapeutic exercise, with focus on clinical decision making, and establishment of the physical therapy plan of care. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. Selected lectures by medical practitioners will enhance student knowledge of imaging and medical-surgical management of orthopedic conditions. (3 hr lect/3 hr lab)

#### PHTH 621 Musculoskeletal Movement System II (5)

Continuation of PHTH 620 with focus on movement system impairments involving the spine, TMJ, core, and pelvic girdle. Analysis of musculoskeletal movement system impairments in body structure/function, activity limitations, and participation restrictions. Emphasis on physical assessment, interpretation/ evaluating of examination findings including outcome measures, application of therapeutic intervention methods such as joint mobilization/manipulation, soft tissue mobilization, therapeutic exercise, with focus on clinical decision making, and establishment of the physical therapy plan of care. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. Selected lectures by medical practitioners will enhance student knowledge of imaging and medical-surgical management of orthopedic conditions. (3 hr lect/4 hr lab)

#### PHTH 622 Professional and Interprofessional Practice III (2)

The final course in a series of three courses that integrates diverse interprofessional perspective to prepare students for effective practice as collaborative team members. This course presents topics relative to health disparities especially for the rural population, health status indicators, health policy, social determinants of health, cultural competency, ethical dilemma resolution including a simulated abuse case utilizing the Realm-Individual Process-Situation (RIPS) model of ethical decision making, global health, and access to health services. This course will also encompass in-depth perspective of compassionate care as it relates to cultural competencies, therapeutic alliance, patient education and rights, including issues of death and dying. (2 hr lect)

#### PHTH 625 Cardiopulmonary Movement System (3.5)

Clinical assessment and management of patients with movement-related cardiovascular and/orpulmonary

conditions. A focus on the development of advanced knowledge and application of skill during patient/ client screening, examination, evaluation, outcome measures appropriate for this population, development of a comprehensive plan of care, and clinical decision making using the best evidence for application of treatment procedures across the continuum of care. EKG interpretation, understanding impact of stress testing, heart and lung auscultation, pulmonary function testing, principles of cardiac rehabilitation, lines and lead management, respiratory airway clearance techniques/chest physical therapy will be integrated during lab activities. Treatment techniques will include patient education including nutrition, administration and dosing of therapeutic exercise and conditioning, breathing techniques, airway clearance, percussion and postural drainage, medical and surgical management, and the potential for recovery for selected acute and chronic conditions across the lifespan. Interpretation of laboratory tests, imaging, and pharmacology will prepare student to safely work with high acuity patients. Nutrition education within the physical therapist's scope of practice will help to promote healthy lifestyle for those living with cardiac and pulmonary disease. Case studies simulated standardized patients, and highfidelity manikin simulation in a multidisciplinary approach will provide students with real-world exposure to acute and critical care scenarios. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. (2 hr lect/3 hr lab)

#### PHTH 626 Management of Select Populations I (2)

Clinical assessment and evaluation of patients with integumentary and lymphatic pathology sets the stage for this course. Normal tissue anatomy, wound healing, nutrition, vascularization, and factors that adversely affect healing are discussed as a foundation for wound management. Examination, evaluation, diagnosis, prognosis, interventions, and outcomes for persons with various types of wounds will be covered using video demonstration and clinical cases. Specific integumentary disorders are discussed including arterial and venous insufficiency ulcers, pressure ulcers, neuropathic ulcers, lymphedema, and burns. Application of specific tests and measures, their reliability and validity, and efficacy of and skill development for treatment interventions such as pulsed lavage, sharp debridement, wound vac application will be covered. Lymphatic circulation and stages of lymphedema will be addressed in preparation for the second in the series addressing treatment of the lymphatic system. A focus on the development of advanced knowledge and application of skill during patient/client examinations, evaluation, development of a comprehensive plan of care, and clinical-decision making using the best evidence for application of treatment procedures in the treatment of the integumentary system. (1 hr lect/2 hr lab)

#### PHTH 635 Clinical Reasoning I (2)

Builds on early skills developed in the first-year courses leading to the ability to make informed clinical decisions. Problem-based and case-based learning activities will be incorporated with simulated standardized patients to further develop critical thinking and reasoning skills for the establishment of the physical therapy diagnosis and plan of care which incorporates the International Classification of Functioning, Disability and Health (ICF) model. Curriculum will include introduction to telehealth history, regulation, reimbursement, and HIPAA protection. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. Additionally, as part of this course, students will present a complex patient case from their summer full-time clinical experience with emphasis on applying the Guide to Physical Therapy Practice as a framework for clinical decision-making skills. (2 hr lect)

#### PHTH 644 Integrated Clinical Practice I (1.5)

This experiential service-learning course is the first of two courses designed to progress the development of clinical competencies needed of an independent physical therapy practitioner in the outpatient setting.

Under faculty mentoring, student physical therapists will practice clinical decision analysis and clinical skills in a community-based teaching research lab, the Center for Applied Movement Science (CAMS), at PNWU. This course is designed to allow the student physical therapist to apply and integrate academic knowledge of the examination, evaluation, outcome measures appropriate to this population, diagnosis, prognosis, and management of a participants with a neurologic, gait, or balance deficit in a clinical setting. Emphasis on patient/clients with balance and movement disorders from acquired brain injury (CVA), Parkinson's disease, or vestibular impairments. Instruction includes essential and assistive technology competencies that improve function or help manage healthcare delivery in a constantly changing digital world. Software and mobile apps are leveraged to improve communication, facilitate learning, and enhance clinical practice and patient outcomes. A patient-centered approach to health and disease is presented to help students recognize conditions both at risk for advanced chronicity and outside the scope of physical therapy. (0.5 hr lect/2 hr lab/clinic)

#### PHTH 645 Integrated Clinical Practice II (1.5)

This experiential, service-learning course is the second of two courses designed to progress the development of clinical competencies needed of an independent physical therapy practitioner in the outpatient setting. Under faculty mentoring, student physical therapists will practice clinical decision analysis and clinical skills in a community-based teaching research lab, the Center for Applied Movement Science (CAMS), at PNWU. This course is designed to allow the student physical therapist to apply and integrate academic knowledge to the examination, evaluation, outcome measures appropriate to this population, diagnosis, prognosis, and management of a participants with a neurologic, gait or balance deficit in a clinical setting. Emphasis on patient/clients with balance and movement disorders from peripheral nerve injury such as spinal stenosis, spinal cord injury, traumatic brain injury, concussion, ALS, and multiple sclerosis. Instruction includes essential and assistive technology competencies that improve function or help manage healthcare delivery in a constantly changing digital world. Software and mobile apps are leveraged to improve communication, facilitate learning, and enhance clinical practice and patient outcomes. A patient-centered approach to health and disease is presented to help students recognize conditions both at risk for advanced chronicity and outside the scope of physical therapy. (0.5 hr lect/2 hr lab/clinic)

#### PHTH 646 Capstone I (1)

The first in a series of three courses introduces the Capstone project, (Case Study, Evidence-Based Project, or Clinical Research) reinforcing the concept of the physical therapist as researcher and scholar, representing the culmination of the Doctor of Physical Therapy degree. This venue provides an opportunity for the student to demonstrate independence in critical thinking, appraisal of research literature, the ability to compile and organize information for disseminating evidence-based material on a topic related to physical therapy. In this preliminary course students will complete a search of the literature to complete a draft of the introduction, review of the literature, as well as explore and identify potential research statistic methods for their project. Students are assigned a faculty mentor to assist in the exploration and development of their Capstone project. CR/NC grading only. (2 hr/wk independent study)

#### PHTH 647 Capstone II (2.5)

In the continuation of the capstone project series this course will continue to refine student use of the literature and facilitate graduate level writing. Students will develop and submit an abstract as the goal of this course surrounds dissemination of their initial research work through presenting the project at the universities research symposium held each April. Additionally, students will submit a critical appraisal of

three presented research projects to refine their skill as a consumer of scientific evidence. Students will submit their completed literature review, methods, and initial results (as available) for their project under the guidance of their faculty capstone mentor. Each student will record a platform presentation outlining their project as a precursor to their oral defense in the fall of year three. CR/NC grading only. (5 hr/ wk independent study)

#### PHTH 650 Clinical Competence in Patient Management II (1)

Simulated standardized patient encounters will be utilized to assess students' ability to formulate a plan of care based on the patient/client management model. Students' knowledge, clinical reasoning, and clinical practice skills will be assessed utilizing a simulated standardized patient emphasizing the first two years of coursework. The student must pass this exam to enroll in PHTH 700 Clinical Experience II. (2 hr lab)

#### PHTH 700 Clinical Experience II (4.5)

This 9-week full-time clinical experience during summer semester following completion of Year 2 allows the student to apply academic knowledge in a clinical setting. Comprehensive examination, evaluation, and intervention will be used to manage the physical therapy patient. By the end of the clinical experience, students are expected to demonstrate intermediate to advanced intermediate performance levels on the Physical Therapist Clinical Performance Instrument Web (PT CPI). CR/NC grading only.

#### PHTH 709 Pediatric Physical Therapy (3.5)

Advanced study of diagnoses and physical therapy management of infants and children with musculoskeletal, neurological, and/or cardiopulmonary impairments. A framework of normal development and aging from birth to young adult is presented and serves as a course foundation. Students will apply motor learning principles to the elements of patient/client management in physical therapy practice, including screening, examination, appropriate outcome measures for the population, evaluation, diagnosis, prognosis, plan of care, intervention, and outcomes related to the pediatric patient. Pediatric imaging examples will be presented. The importance of nutrition, exercise, activities to prevent childhood obesity will be discussed. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. Topics include but are not limited to developmental delay and disability, family-centered care, legislation related to provision of pediatric physical therapy services, orthotics, prosthetics, and assistive technologies. (2 hr lect/3 hr lab)

#### PHTH 722 Geriatric Physical Therapy (3)

Synthesis of the biology of aging with common orthopedic and neurologic problems special to the older adult patient. Students will learn key concepts related to the normal aging process versus senescence, age-related disorders, multimorbidity, physical resilience, and pharmacological principles including polypharmacy. This course emphasizes analysis of clinical problems and issues facing the physical therapist in utilizing functional testing and community resources with the elderly. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. Students will assess older adults from the community, using age-appropriate assessments to provide recommendations to enhance or facilitate continuance of physical function, independence, and quality of life. (2 hr lect/2 hr lab)

#### PHTH 723 Administration and Leadership (2)

Study of the management of physical therapy practice and leadership development. This course presents an in-depth discussion of administrative issues overarching physical therapy practice, including

economic trends, operational policy, budgeting, reimbursement, staffing, business structure, performance improvement, public relations, employment law, quality improvement, and entrepreneurship. In addition, this course will discuss such topics as leadership styles, effective team leadership techniques, application of compliance and motivation principles, peer teaching, consultation skills, decision-making strategies for conflict resolution, and communicating to improve outcomes as a framework for students to develop skills for leadership in daily practice. Students will prepare résumés and begin career planning. (2 hr lect)

#### PHTH 727 Management of Select Populations II (2)

This course examines physical therapy assessment and intervention of specialty diagnosis including cancer, lymphedema, and pelvic/reproductive dysfunction. Cancer components include screening, understanding medical staging and treatment modalities, pharmacology, imaging, and the physical therapist role in facilitating safe and effective movement and exercise in this population. Pelvic health content will include entry level assessment and treatment of sexual dysfunction, incontinence, pelvic floor laxity, pelvic pain, and pregnancy musculoskeletal dysfunction. Lymphedema assessment and treatment including entry level manual decongestive therapies and compression wrapping. Students will conduct a search of the literature and apply evidence to facilitate application of current relevant clinical knowledge to clinical cases. (1 hr lect/2 hr lab)

#### PHTH 736 Clinical Reasoning II (3)

This is the second course in a two-course series which further builds on the ability to make informed clinical decisions. Emphasis on developing an independent practitioner of physical therapy that has the knowledge base and clinical decision-making skills to effectively screen the patient for medical referral and if referral is indicated provide effective communication for transition. Focus is on integrating all parts of patient/client management-examination, evaluation, diagnosis, prognosis, and intervention with emphasis in the practice of screening for medical referral and being able to predict realistic levels of improvement in patients with complex clinical presentations, atypical signs and symptoms, and/or comorbidities. This course will prepare the student to recognize serious pathology, interpret test results, generate a diagnosis, refer to other practitioners, and recognize the indications for physical therapy interventions. (3 hr lect)

#### PHTH 746 Integrated Rural Clinical Outreach II (3)

Experiential service-learning (SL) course designed to challenge the student to manage medically underserved patients/clients in a rural setting with limited resources as an interdependent practitioner working within a collaborative medical model. Additionally, students will gain an understanding of necessary assessments which promotes direct access for health and wellness intervention. Students will be assigned to a community-based health center or clinic under the direction of a faculty member who is a licensed physical therapist. In consultation with faculty clinical instructors and health center staff students are responsible for examination, tests/measures, evaluation, differential diagnosis and development of a plan of care that includes progressive interventions, coordination of care, and patient education for patients. As part of this course, students will also explore the role of physical therapists in the prevention and in the promotion in health, wellness, and fitness. Students will apply this knowledge through the design and implementation of a community-based wellness/prevention program or health fair event that explores health and wellness across the lifespan in selected community agencies in the Yakima Valley. (1 hr lect/4 hr lab/clinic/SL)

#### PHTH 748 Capstone III (1.5)

This course is the culmination of the Capstone series. Students will finalize their project through the

construction of three products, a PowerPoint for their oral defense, a poster for dissemination at the DPT Capstone Symposium, and submission of their final manuscript. The dissemination of their work will be critiqued by their peers, community members, and the profession through the invitation of local physical therapist clinicians. Additionally, students will present an oral defense of their Capstone Project to their Doctoral Committee for final confirmation. CR/NC grading only. (3 hr/wk independent study)

#### PHTH 750 Clinical Competence in Patient Management III (1)

Simulated standardized patient encounters will be used to assess students' ability to formulate a plan of care based on the patient/client management model. Students' knowledge, clinical reasoning, and clinical practice skills will be assessed utilizing a simulated standardized patient emphasizing the entire curricular model. The student must pass this exam to enroll in PHTH 790 16-week Clinical Experience III in the spring semester. (2 hr lab)

#### PHTH 790 Clinical Experience III (8)

This 16-week (or two-8 week) full-time, terminal clinical experience(s) during spring semester of the final year allows the student to apply academic knowledge in a clinical setting. Upon completion of this course, the student must demonstrate mastery of physical therapy skills considered appropriate for entry-level practice on the Physical Therapist Clinical Performance Instrument Web (PT CPI). CR/NC grading only.



# MASTER OF ARTS IN MEDICAL SCIENCES

Master of Arts in Medical Sciences | 142

The Master of Arts in Medical Sciences (MAMS) program introduces students to a broad range of topics in the medical sciences, while strengthening their academic credentials for admission to medical and other health professions schools. The MA in Medical Sciences program is taught and mentored by highly skilled and supportive medical practitioners and educators.

# **MAMS** Admissions

The Master of Arts in Medical Sciences requirements for admission to PNWU are found on the following pages and PNWU.edu. With regard to admission, the University follows the non-discrimination policy and the requirements of federal and state law including Title IX. It does not discriminate against applicants based on socio-economic background.

PNWU seeks to admit students compatible with the University mission and who have the prerequisite knowledge, skills, and abilities to assure a reasonable probability of success. Enrollment Services acts as the primary agent for applicants and has an admissions process that responds to applicant and University needs.

### **Application Requirements**

The minimum age to matriculate at PNWU is 18 years of age and the applicant must be a US Citizen, permanent resident, or Deferred Action for Childhood Arrivals (DACA) status.

The MAMS Admission Committee will review files only after all of the following materials have been received.

- 1. A completed Post Baccalaureate Centralized Application System (PostbacCAS) application, or other central application in which PNWU participates.
  - A. A personal statement:
  - B. Experience and achievements;
  - C. Submit official transcripts of all academic coursework. Coursework taken at foreign institutions must be evaluated for US equivalence by an evaluation service and an official copy must be sent directly from the service.
  - D. Submit three letters of reference from faculty members or health professionals with knowledge of the applicant's ability to successfully complete a rigorous graduate program.
- 2. Achieve a minimum cumulative grade point average of 2.75 on a 4.0 scale in college or university coursework or a 3.0 grade point average on a 4.0 scale during the last 60 semester hours (90 quarter hours) of undergraduate degree study. This requirement may be waived at the discretion of the MAMS Admission Committee based on a written appeal from the applicant explaining any extenuating circumstances and what has changed in their situation.
- Provide test scores from one of the following: Prospective students are responsible for determining 3 and completing the typical entrance exam for admission into medical, dental, optometry, physical therapy, pharmacy, or other health profession program and institution of their choice.
  - A. Medical College Admissions Test (MCAT)
  - B. Pharmacy College Admission Test (PCAT)
  - C. Dental Admissions Test (DAT)
  - D. Graduate Record Examination (GRE)

- E. Optometry Admissions Test (OAT), or
- F. Other professional program admissions test
- 4. A PNWU supplemental application and nonrefundable supplemental application fee of \$50 made payable to PNWU; and
- of their choice.

These prerequisites must be passed and taken for credit at a regionally accredited college or university with a grade of C or better (grades of C- may not be acceptable to health professional programs). Prerequisites often include:

English Composition and Literature General Chemistry Organic Chemistry Physics **Biological Sciences** 

The MAMS Admission Committee will consider applications from all qualified individuals; however, in order to meet the mission, preference is given to applicants from Alaska, Idaho, Montana, Oregon, Washington, and rural and/or medically underserved areas of the country.

### **Review and Notification**

PNWU will receive the application through the PostbacCAS system, or other central application in which PNWU participates, once a verification process is complete. Applicants should review the PostbacCAS instructions and FAQs to assist them in submitting their application properly. The MA in Medical Sciences program utilizes rolling admissions; applications are evaluated as they are submitted, and the program fills quickly.

The major criteria for rating applicants are academic excellence, commitment to work in an underserved area, and personal characteristics. Academic excellence is measured by assessing results of preprofessional admission tests and academic performance. The MAMS Admission Committee carefully evaluates each applicant to determine eligibility and suitability to the program. For some applicants a telephone, video, or in person interview will be required.

The MAMS Admission Committee reviews the applicant's file and notifies applicants of the decision via email and the PNWU Self-Service portal. A non-refundable acceptance fee of \$500 is required from accepted applicants to confirm their acceptance. The acceptance fee is applied to the student's first term of tuition.

Acceptance is conditional until all required documentation is received and completed to PNWU's satisfaction.

5. Completion of the typical prerequisite coursework for admission into medical, dental, optometry, physical therapy, pharmacy, or other health profession schools. Prospective students are responsible for determining the prerequisites for the health professional program and institution

- 6 Semester Hours/9 Quarter Hours
- 8 Semester Hours/12 Quarter Hours

• Final, official transcripts from each college or university ever attended must be on file prior to matriculation. The transcript must come directly from the college, university or the central

application system. Foreign transcripts must be evaluated for US equivalence by an approved evaluation service.

- A cleared criminal background check.
- A cleared drug screening, if randomly selected.
- Certify the ability to meet the Minimal Technical Standards and can perform the requirements with or without reasonable accommodation.
- · Documentation of required immunizations
- Documentation of health care coverage/insurance
- The ability to use a personal or network computer (PC) is an important skill that will assist students with PNWU course work. Therefore, it is strongly recommended that each entering student have a good working knowledge of common PC use and applications. PNWU utilizes the latest in Microsoft Office® and Windows® applications. See the minimum student laptop requirements.
- Financial aid counseling sessions and/or modules
- Matriculation forms and surveys; such as ID badge form, parking permit form, etc.
- Complete annual on-line trainings modules; such as HIPAA, hazardous materials, blood borne pathogens, sexual assault prevention, and research training
- Complete pre-orientation modules
- Required to attend a new student orientation

PNWU does not usually defer admission. Requests for deferral are submitted to the MAMS Admission Committee will be reviewed, decided and the applicant notified.

Note: Intentional misrepresentation or omission of information relative to scholastic records, test records, criminal background reports, etc. will subject the applicant to rescinded admission or a student to dismissal. The University reserves the right to deny admission to any applicant for any reason it deems sufficient.

# MAMS Academics

### MAMS Academic Calendar

	2023-2024
Orientation for First-Year Students	Week of July 31, 2023
Fall Term Begins	August 7, 2023
Last Day to Withdraw with a Partial Refund	August 25, 2023
Labor Day (No on-campus classes)	September 4, 2023
Constitution Day	September 18, 2023
Mid-Term for Fall Term	October 6, 2023
Veterans Day (No on-campus classes)	November 10, 2023
Thanksgiving Break (No on-campus classes)	November 22-24, 2023
Fall Term Ends	December 15, 2023
Fall Term Grades Due	December 22, 2023

Spring Term Begins	January 8, 2024
Martin Luther King, Jr. Day (No on-campus classes)	January 15, 2024
Last Day to Withdraw with a Partial Refund	January 26, 2024
Presidents' Day (No on-campus classes)	February 19, 2024
Mid-Term for Spring Term	March 8, 2024
Spring Recess (No on-campus classes)	March 11-15, 2024
Spring Term Ends	May 17, 2024
Commencement	May 18, 2024
Spring Term Grades Due	May 24, 2024
Memorial Day (No on-campus classes)	May 27, 2024

### Grading and Evaluations

The quality of the student's work is reported to the MAMS program director at midterm if it is at a D or an F level. Midterm warning reports may be issued and are used as a basis for advising students.

Final grades are determined by the combined results of assignments, examinations, and participation, and mastery of the subject as evidenced by the ability to communicate clearly in both oral and written form. The following letter grades and grade points per credit are used to denote the quality of a student's work.

Grade	Description	Grade Points	
А	Excellent	4.0	
A-		3.7	
B+		3.3	
В	Above Average	3.0	
B-		2.7	
C+		2.3	
С	Average	2.0	
C-		1.7	
D+		1.3	
D	Below Average	1.0	
D-		0.7	
F	Failure	0.0	

### Academic Progress

A student must be making satisfactory academic progress in a program by earning a minimum of a 2.00 cumulative GPA and completing a minimum of 67 percent of all attempted credits.

A student whose midterm grade for any course is below a GPA of 2.00 will receive an academic warning notice. At the end of the term, a student whose overall GPA is below 2.00 or who completes less than 12 credits will be placed on academic suspension and ineligible for federal student aid and may not continue in the program. Students not making satisfactory academic progress will be notified by Enrollment Services and reported to the MAMS Student Progress Committee.

Students placed on suspension may submit a written appeal to the MAMS Student Progress Committee explaining why the student failed to make satisfactory academic progress, including any extenuating circumstance, such as injury, illness, death of a relative, or other circumstance beyond their control. The appeal must include supporting documentation and what has changed in their situation that will allow them to make satisfactory progress the next term.

If a meeting is warranted, a notice to appear will be delivered to the student by secure email. The failure of addressee to open the secure email may result in immediate disciplinary action. Student Progress Committee meetings with students are private and confidential including, but not limited to, the names of participants, proceedings, discussion, minutes, and findings. The following are prohibited in all Student Progress Committee meetings unless otherwise authorized in writing by the program director and Student Progress Committee chairperson: 1) electronic recording of the meeting, except for official minutes; 2) legal counsel; and 3) uninvited individuals.

If the MAMS Student Progress Committee determines that the student should be able to meet the academic progress standards by the end of the next term, based on the appeal, the student will be placed on academic probation. If the MAMS Student Progress Committee determines that the student will not be able to meet the academic progress standards a recommendation of dismissal will be made to the program director who will notify the student of the decision within five business days of receipt of the student progress committee recommendation. If the student does not believe due process was properly followed the student may appeal the decision by submitting a detailed letter to the provost within five business days after receiving the dismissal notice. The provost decision is final. Students are notified by letter and secure email of all decisions.

A student on academic warning or probation status may not participate in PNWU-sponsored extracurricular events or organizations, is not eligible for PNWU sanctioned travel, is not permitted to be listed on any active research study, and may not run for or hold the position of executive, class, or club officer. At the discretion of the student progress committee warning or probation status may include additional restrictions from activities the committee deems detrimental to academic performance.

Course withdrawals and repeats are allowed as part of a probation status and count as attempted credits. All periods of the student's enrollment count when assessing progress. A student regains satisfactory academic status by earning a minimum cumulative GPA of 2.0 and completing 67 percent of all attempted credits.

### MAMS Educational Objectives and Outcomes

Achievement of the four (4) main MAMS program learning objectives/outcomes, listed below, by program graduates will strengthen student applications and demonstrate readiness for health care professional school or employment within the health care field. MAMS students/graduates will:

- professions as well as disease and treatment.
- practice or research.
- that guide health care practitioners.

## Graduation Requirements

It is the responsibility of each student to know their status academically and professionally, to meet university and class deadlines throughout their course of study, and to satisfy the following requirements for the master's degree:

- credits, 150 percent of the one-year program.
- 2. Maintain a minimum cumulative grade point average of 2.50.
- 3. Submit a graduation application for master's degree.
- Northwest University of Health Sciences.
- 5. Clear all financial obligations to the university before graduation.

### Academic Degree Requirements

The MA in Medical Sciences degree program requires one year of study, 36 semester credits.

Course	Course #	Credits
Fall Semester		
Medical Skills and Theory I	BIOMED 505	4
Biomedical Ethics	BIOMED 507	3
Health Professions I	BIOMED 509	1
Scientific Foundations of Medicine	BIOMED 511	10
	Total Fall Semester	18
Spring Semester		
Medical Skills and Theory II	BIOMED 506	4
Research Theory and Techniques	BIOMED 508	3
Health Professions II	BIOMED 510	1
Foundations of Personalized Medicine	BIOMED 512	10
	Total Spring Semester	18

1. Demonstrate a fundamental understanding of the basic sciences that underlie the health

2. Relate a basic understanding of the methods used in scientific inquiry and data analysis as well as presentation of scientific/medical data, thereby facilitating preparation for evidence-based

3. Show an elementary understanding of the clinical skills, roles, and decision making standards

4. Integrate a functional understanding of professionalism, cultural awareness, and interprofessional education applicable towards optimal patient care, team based practice, and scholarly activity.

1. Complete a minimum of 36 semester credit hours at the graduate level and within attempting 54

4. Fulfill catalog requirements in effect at the time of the student's official acceptance to Pacific

6. Complete required exit sessions and surveys as determined by PNWU i.e. loan counseling, etc.

# MAMS Course Information

#### BIOMED 505, Medical Skills and Theory I (4)

This is part one of a two-course sequence. The sequence will provide an overview of the practice settings, economic operations, governmental regulations, and provider roles associated with the delivery of patient care within the US healthcare system. This sequence will also introduce students to the philosophy. scope, interprofessional teamwork, and methodology basic to the practices of health professionals like physical therapists, occupational therapists, physicians, physician assistants, nurse practitioners, dentists, optometrists, podiatrists, and pharmacists. Admittance to MAMS program or permission of the MAMS Director is required.

#### BIOMED 506, Medical Skills and Theory II (4)

This is part two of a two-course sequence. The sequence will provide an overview of the practice settings, economic operations, governmental regulations, and provider roles associated with the delivery of patient care within the US healthcare system. This sequence will also introduce students to the philosophy, scope, interprofessional teamwork, and methodology basic to the practices of health professionals like physical therapists, occupational therapists, physicians, physician assistants, nurse practitioners, dentists, optometrists, podiatrists, and pharmacists. Admittance to MAMS program or permission of the MAMS Director is required.

#### **BIOMED 507, Biomedical Ethics (3)**

This course introduces students to major cases that helped shape medical ethics today. Topics such as assisted reproduction, research on animals and humans, genetics, abortion, comas, and physicianassisted suicide will be discussed in class, not to debate what is right or wrong, but to analyze the ethical issues present. Analytical tools covered are duty vs. utility, and the values of autonomy, beneficence, confidentiality, non-maleficence, justice, and honesty. Admittance to MAMS program or permission of the MAMS director is required.

#### **BIOMED 508, Research Theory and Techniques (3)**

This theory and technique course will acquaint students with the scientific method, research project design, and relevant biomedical techniques utilized to collect/interpret data. Prerequisites: Acceptance into the MAMS Program or permission of the MAMS director required.

#### BIOMED 509, Health Professions I (1)

This seminar course will acquaint students with A.) health care careers, B.) standardized admissions exams and application services, C.) secondary applications and interviews, and D.) the first year of professional school. Mock interviews will be completed as part of the course. Prerequisites: Acceptance into the MAMS Program or permission of the MAMS director required.

#### **BIOMED 510, Health Professions II (1)**

This seminar course is a continuation of BIOMED 509 and will further acquaint students with A.) health care careers, B.) standardized admissions exams and application services, C.) secondary applications and interviews, and D.) the first year of professional school. Mock interviews will be completed as part of the course. Prerequisites: Acceptance into the MAMS Program or permission of the MAMS director required.

### BIOMED 511. Scientific Foundations of Medicine (10)

MAMS Scientific Foundations of Medicine (BIOMED 511) is a 10.0 credit hour course, taught in the fall semester alongside BIOMED 501. Students will learn the structure and function of the human body's most basic constituents and the roles these components play in normal function and pathophysiologic processes. Additionally, students will gain a basic understanding of bacteriology, virology, mycology and parasitology with an emphasis on microbe-host interactions, infectious disease processes and response of the human body to infection. Major elements of the course include key concepts in biochemistry, embryology, genetics, histology, immunology, microbiology, molecular biology, neuroscience, nutrition and physiology with a special emphasis on integration and regulation. The course also introduces students to concepts in pathology, laboratory and bio-molecular methods and clinical case scenarios. Admittance to MAMS program or permission of the MAMS director is required.

### **BIOMED 512, Personalized Foundations of Medicine (10)**

This one semester 10 credit hour course will provide students with the health psychology, health communication, health disparities, human anatomy, leadership, and pharmacogenomics foundations useful in medical, dental, pharmacy, physician assistant, optometry, or podiatry school. Admittance to MAMS program or permission of the department chair is required.

#### BIOMED 513, Special Topics (4 - 8)

The special topics course is designed to empower students with the flexibility to gain an understanding of an advanced topic in medicine and health care relevant to their career goals. Topics might include but not be limited to: therapeutic modalities, rehabilitation theory and techniques, pharmacology, and pathophysiology. May be repeated for up to eight semester hours of credit.



## Administration of the University

Michael Lawler, PhD, MSW, President, PhD conferred at University of California Davis The President of Pacific Northwest University of Health Sciences is the Chief Executive Officer and has final responsibility for the administration of the University. The President reports directly to the Board of Trustees.

Wayne Miller, PhD, Provost/Chief Academic Officer, PhD conferred at Brigham Young University The University Provost and Chief Academic Officer reports to the President and is responsible for effective academic administration in alignment with the mission of PNWU.

Frank D. Alvarez, MPH, Chief Operations Officer, MPH conferred at University of California Berkeley The Chief Operations Officer reports to the President and is responsible for the effective and efficient management and administration of the University's non-academic operations.

TBD, Chief Financial Officer The Chief Financial Officer reports to the President and is responsible for developing and overseeing all finance functions of the University.

Jameson Watkins, MLIS, Chief Information Officer, MLIS conferred at Emporia State University The Chief Information Officer reports to the President and oversees all University information technology.

Dean O'Driscoll, MA, Chief Communications Officer, MA conferred at Southern Utah University The Chief Communications Officer reports to the President and is responsible for developing and guiding the strategy for all communication, website and public relations messages and marketing collateral to

Erin Murphy, MS, Chief Human Resources Officer, MS conferred at Johns Hopkins University The Chief Human Resources Officer reports to the President and advises the executive team on all human capital related matters helping to ensure that the University has the talent, processes/systems, and commitment necessary to grow and meet the mission.

Mirna Ramos-Diaz, MD, MA, FAAP, Chief Diversity and Inclusion Officer, MD conferred at University of

Miami School of Medicine The Chief Diversity and Inclusion Officer reports to the President and advises the executive team and leads strategic diversity efforts that advance PNWUs mission and vision.

# Capella University

consistently articulate and brand the University.

The Assistant Provost for Integrated Institutional Effectiveness (OIIE) promotes and supports institutional and programmatic mission attainment within the broad institutional effectiveness categories of accreditation, compliance, institutional research, information management & reporting, planning & assessment support, student and faculty assessment support, and academic program & faculty support.

#### LeAnn M. Hunter Chase, MS, Assistant Provost for Enrollment Management and University Registrar, MSOD conferred at Central Washington University

The Assistant Provost for Enrollment Management and University Registrar promotes and supports

Lori A. Fulton, EdD, Assistant Provost for Integrated Institutional Effectiveness, EdD conferred at

institutional and programmatic mission attainment within the broad enrollment management areas of admission, financial aid, academic records, and student affairs.

Frederica Amity, PhD, Dean of Students, PhD conferred at Oregon State University The Dean for Students promotes and supports institutional and programmatic mission attainment within the broad student affairs areas of student success and achievement, and student life.

Mark A. Taylor, PhD, Director of MAMS Program, PhD conferred at Purdue University

The Director of the Master in Arts of Medical Sciences degree program is responsible for the leadership and administration of the program.

### Administration of the College of Osteopathic Medicine

Thomas Scandalis, DO, Dean, DO conferred at New York Institute of Technology The Dean is the chief academic, budgetary, and personnel officer of the College of Osteopathic Medicine. The Dean reports to the Provost. It is the duty of the Dean to establish the academic program as it relates to the mission of the College.

Emily Oestreich, PhD, Associate Dean for Preclinical Education, PhD conferred at University of Rochester The Associate Dean for Preclinical Education is responsible for leading and supporting the faculty and academic staff in the delivery of instruction that meets the goals for academic excellence in the College of Osteopathic Medicine (COM) in years one and two. In addition, the Associate Dean contributes to the development of sound academic policies and procedures that support the academic goals.

Elizabeth McMurtry, DO, Associate Dean for Clinical Education, DO conferred at Des Moines University The Associate Dean is responsible for the administration of clinical rotations including oversight of adjunct clinical faculty, curriculum development, delivery, and evaluation.

Russell Maier, MD, Associate Dean for Graduate Medical Education, MD conferred at University of Washington

The Associate Dean is responsible for ensuring successful training experiences for residents by providing a supportive working environment and resources to prepare students for the next step in their careers.

Heather Phipps, DO, MBA, FAAOS, Assistant Dean for Clinical Education, DO conferred at Ohio University Heritage College of Medicine

The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system.

Brenda Polite, MD, Assistant Dean for Clinical Education, MD conferred at Loma Linda University The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system.

Miko Rose, DO, FNAOME, Assistant Dean for Clinical Education, DO conferred at Touro University College of Osteopathic Medicine

The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical

Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system.

College of Osteopathic Medicine

The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system.

University of Health Sciences

The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system.

Lance Dunlop, MD, Assistant Dean for Clinical Education, MD conferred at University of Pennsylvania The Assistant Dean for Clinical Education is responsible to assist the Associate Dean for Clinical Education in managing the personnel and administrative operations of the Office of Clinical Education and operations of the geographically dispersed COM clinical campus system.

## Administration of the School of Dental Medicine

and Dentistry of New Jersey

The Dean of the proposed School of Dental Medicine at Pacific Northwest University of Health Sciences is the lead academic, administrative, and fiscal officer of the School. The Dean provides executive leadership for the school and reports to the provost. It is the duty of the Dean to enhance the academic program as it relates to PNWU and SDM missions.

## Administration of the School of Occupational Therapy

Heather Fritz, PhD, Program Director, PhD conferred at University of North Carolina at Chapel Hill The Program Director is responsible for leading and supporting the academic, budgetary, and personnel of the School of Occupational Therapy. The Program Director reports to the Provost. It is the duty of the Program Director to establish the academic program as it relates to the mission of the School.

#### Malcolm Cutchin, PhD, Director of Research, PhD conferred at University of Kentucky

The Director of Research (DoR) is responsible for developing and refining the research and scholarship components of the MSOT and OTD curriculums and is responsible for the school's compliance with the research and scholarship requirements set forth by the Accreditation Council for Occupational Therapy Education (ACOTE).

Jami Flick, PhD, Director of Clinical Education, PhD conferred at Nova Southeastern University The Director of Clinical Education is responsible for the clinical education component of the School of Occupational Therapy including placements of students. The Director of Clinical Education reports to the SOT Program Director. It is the duty of the Director of Clinical Education to establish the clinical

Jeanne Rupert, DO, PhD, Assistant Dean for Clinical Education, DO conferred at Ohio University Heritage

Marie Cadwell Meyers, DO, Assistant Dean for Clinical Education, DO conferred at Pacific Northwest

Fotinos Panagakos, DMD, PhD, Dean, School of Medicine, DMD, PhD conferred at University of Medicine

education component of the curriculum as it relates to the mission of the School and University.

### Administration of the School of Physical Therapy

**Peggy Trueblood, PhD, Program Director,** PhD conferred at University of California, Los Angeles (UCLA) The Program Director is responsible for leading and supporting the academic, budgetary, and personnel of the School of Physical Therapy. The Program Director reports to the Provost. It is the duty of the Program Director to establish the academic program as it relates to the mission of the School.

**Amanda Adamson, DPT, Director of Clinical Education,** DPT conferred at University of South Dakota. The Director of Clinical Education is responsible for the clinical education component of the School of Physical Therapy including placements of students. The DCE reports to the SOPT Program Director. It is the duty of the DCE to establish the clinical education component of the curriculum as it relates to the mission of the School and University.

### Faculty

Name	Degree Held	Conferring Institution	Title
<u>Amanda Adamson</u>	PT, DPT	University of South Dakota	Director of Clinical Education & Assistant Professor, Physical Therapy
Frederica Amity	PhD	Oregon State University	Dean of Students & Assistant Professor
Aaron Anderson	DO	Philadelphia College of Osteopathic Medicine	Adjunct Assistant Professor, Family Medicine
Erin Anderson	DO	Philadelphia College of Osteopathic Medicine	Adjunct Assistant Professor, Family Medicine
<u>Nancy Balash</u>	DPT	Arizona School of Health Sciences	Assistant Professor, Anatomy
<u>Mark Baldwin</u>	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Chair of Internal Medicine & Professor
Ruth Bishop	DO, MPH	University of New England College of Osteopathic Medicine	Assistant Professor, Family Medicine
Michael Blizniak	DPT	Ithica College	Assistant Professor, Physical Therapy
<u>Albert Brady</u>	MD	University of California	Chair of Clinical Medicine & Professor

<u>Kathaleen Briggs-Early</u>	PhD, RDN, CDE	Washington State University	Professor, Nutrition
Marie Cadwell Meyer	DO	Pacific Northwest University of Health Sciences	Assistant Dean for Clinical Education, Assistant Professor
<u>Debra Callahan</u>	MD	Ohio State University	Associate Professor, Pathology
Brad Callan	PT, PhD, OCS	Nova Southeastern University	Assistant Professor, Physical Therapy
<u>Petr Cigner</u>	MBBS	The University of Queensland	Assistant Professor, Family Medicine
Holly Clark	MS	Touro University of California	Assistant Professor, Family Medicine
Malcolm Cutchin	PhD	University of Kentucky	Professor & Director of Research, School of Occupational Therapy
<u>Jessica Di Nizio</u>	DO	New York Institute of Technology College of Osteopathic Medicine	Assistant Professor, OPP
<u>Joseph DiMeo</u>	DO	New York Institute of Technology College of Osteopathic Medicine	Chair of Family Medicine/OPP & Associate Professor
Lance Dunlop	MD	University of Pennsylvania	Assistant Dean for Clinical Education
<u>Thomas Eglin</u>	MD	Emory University	Assistant Professor, Family Medicine
William Elliott	MD, PhD	University of Chicago	Chair of Biomedical Sciences & Professor
Jami Flick	MS, OTR/L	University of South Alabama	Associate Professor, Occupational Therapy
Kevin Foley	MD	University of Chicago Pritzker School of Medicine	Assistant Professor, Family Medicine
<u>Heather Fritz</u>	PhD	University of North Carolina at Chapel Hill	Associate Professor, Occupational Therapy
Philip Hawley	PsyD	Forest Institute of Professional Psychology	Adjunct Assistant Professor, MAMS
<u>Sean Hancock</u>	MSPA, PA-C	Heritage University	Assistant Professor, Family Medicine
William Hatch	DHEd, PAC	A.T. Still University of Health Sciences	Adjunct Assistant Professor, Family Medicine
Christian Heck	PhD	Oklahoma State University	Assistant Professor, Anatomy

Katheryn Hudon	DO	Pacific Northwest University of Health Sciences	Division Chief of Pediatrics & Assistant Professor
<u>Brandon Imamshah</u>	DROT, MOT, OTR/L, CSRS, SKTP	University of Puget Sound	Assistant Professor, Occupational Therapy
David Johnson	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Assistant Professor, OPP
Wade Justice	MD	University of Arizona	Assistant Professor, Clinical Medicine
<u>Cheryl Kerfeld</u>	PhD	University of Washington	Associated Faculty, Physical Therapy
Corwin King	PhD	Pennsylvania State University	Adjunct Professor, MAMS
Shaun Knox	DO	Touro University California	Adjunct Assistant Professor, Family Medicine
Katheryn Lauer	MD	Emory University	Adjunct Assistant Professor, Family Medicine
Eric Lee	PhD, MS	University of Oklahoma-Norman	Assistant Professor, Biomedical Sciences
Stephen Litchfield	DO	Kansas City University of Medicine & Biosciences College of Osteopathic Medicine	Assistant Professor, OPP
Janelle Mapes	PhD	University of Illinois at Urbana-Champaign	Associate Professor, Anatomy
Charles Martin	DPT	Des Moines University	Assistant Professor, Anatomy
<u>Crystal Martin</u>	DO	Nova Southeastern University	Assistant Professor, OPP
Phil Mattocks	PhD	University of Washington	Associate Professor, Physiology
Elizabeth McMurtry	DO, FACEP	Des Moines University College of Osteopathic Medicine	Associate Dean for Clinical Education & Associate Professor
Keith Monosky	PhD	George Washington University	Adjunct Professor, Family Medicine
<u>Wendell Nakamura</u>	DROT, MOT, OTR/L, CLA	University of Puget Sound	Associate Professor, Occupational Therapy

Nina Ngo	DO	Pacific Northwest University of Health Sciences	Assistant Professor, Family Medicine
<u>Jeffrey Novack</u>	PhD	University of Washington	Professor, Biomedical Sciences
Kelly Noyes	DO	Pacific Northwest University of Health Sciences	Assistant Professor, Internal Medicine
Emily Oestreich	PhD	University of Rochester	Associate Dean for Preclinical Education & Associate Professor
<u>Fotinos Panagakos</u>	DMD, PhD	University of Medicine and Dentistry of New Jersey	Dean, School of Dental Medicine
<u>Heather Phipps</u>	DO, MBA, FAAOS	Ohio University College of Osteopathic Medicine	Assistant Dean for Clinical Education, Division Chief, Surgery, & Assistant Professor
<u>Brenda Polite</u>	MD	Loma Linda University School of Medicine	Assistant Dean for Clinical Education
<u>Julie</u> Randolph-Habecker	PhD	Ohio State University	Chief of Pathology & Professo
<u>Katina Rue</u>	DO	University of Health Sciences	Adjunct Assistant Professor, Family Medicine
<u>Miko Rose</u>	DO	Touro University College of Osteopathic Medicine	Assistant Dean for Clinical Education & Associate Professor
<u>Jeanne Rupert</u>	DO, PhD	Ohio University	Assistant Dean for Clinical Education & Assistant Professor
<u>Tiffany Salido</u>	PT, DPT, PhD	Wake Forest University	Assistant Professor, Physical Therapy
<u>Thomas Scandalis</u>	DO	New York Institute of Technology College of Osteopathic Medicine	Dean for College of Osteopathic Medicine & Professor
<u>Michael Scott</u>	DO, MPH	A.T. Still University of Health Sciences Kirksville College of Osteopathic Medicine	Chief of Dermatology & Professor, Clinical Medicine
<u>Jenna Segraves</u>	PT, DPT, NCS, CLT	University of Delaware	Assistant Professor, Physical Therapy
<u>Rebeca Segraves</u>	PT, DPT, WCS, CLT	Western Caroline University	Assistant Professor, Physical Therapy

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<u>Dan Selski</u>	PhD	University of Rochester	Associate Professor, Anatomy
<u>Lisa Siino</u>	DO	University of New England	Assistant Professor, OPP
<u>Amanda Smith</u>	PhD	University Albany	Assistant Professor, Anatomy
Brooke Steadman	DO	Pacific Northwest University of Health Sciences	Adjunct Assistant Professor, Family Medicine
Anthony Stephas	DHSC, PA-C	AT Still University of Health Sciences	Assistant Professor, Family Medicine
<u>Kimberly Taylor</u>	PhD	Janus Pannonius University	Chief of Microbiology & Associate Professor
<u>Mark Taylor</u>	PhD	Purdue University	Director of MAMS Program, Chief of Cell Sciences, & Professor
<u>Joel Thome</u>	PharmD	University of Washington	Assistant Professor, Pharmacology
<u>Kristi Trickett</u>	DO	Pacific Northwest University of Health Sciences	Adjunct Assistant Professor, Family Medicine
Peggy Trueblood	PT, PhD	University of California, Los Angeles (UCLA)	Program Director for Physical Therapy & Professor
Ronald Walser	DPT	Franklin Pierce University	Chair of Anatomy & Associate Professor
Sara Wyckoff	PhD	University of Washington	Assistant Professor, Occupational Therapy
<u>Lei Ye</u>	PhD	Utah State University	Director of Academic Technology & Assistant Professor
Natalie Yoshioka	PhD	Penn State University	Assistant Professor, Anatomy
Kaelin Young	PhD	University of Oklahoma-Norman	Associate Professor, Physiology

## Emeriti Faculty

Diana Rhodes, DVM, PhD (2010-2022), Professor Emeritus, Anatomy; BS, MS, DVM, and PhD degrees from Purdue University Robert Sorrells, PhD (2008-2022), Professor Emeritus, Anatomy; PhD, University of Georgia, 1997

## **Board of Trustees**

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# STATEMENT OF CERTIFICATION

This catalog is certified to be true and correct in content and policy as of the date of publication.

Michael J. Lawler, PhD, MSW • President

Pacific Northwest University of Health Sciences is an equal opportunity institution.



Pacific Northwest University of Health Sciences

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